



ANNUAL STATEMENT

For the Year Ending December 31, 2009
OF THE CONDITION AND AFFAIRS OF THE

NORTH CAROLINA MUTUAL LIFE INSURANCE COMPANY

NAIC Group Code	0000	, 0000	NAIC Company Code	67032	Employer's ID Number	56-0340860
	(current period)	(prior period)				
Organized under the Laws of	North Carolina			State of Domicile or Port of Entry	NORTH CAROLINA	
Country of Domicile	United States of America					
Incorporated/Organized	02/28/1899			Commenced Business	04/01/1899	
Statutory Home Office	411 W. Chapel Hill Street			Durham, NC 27701-3616		
	(Street and Number)			(City or Town, State and Zip Code)		
Main Administrative Office	411 W. Chapel Hill Street					
	(Street and Number)					
	Durham, NC 27701-3616			(919) 682-9201		
	(City or Town, State and Zip Code)			(Area Code)(Telephone Number)		
Mail Address	411 W. Chapel Hill Street			Durham, NC 27701-3616		
	(Street and Number)			(City or Town, State and Zip Code)		
Primary Location of Books and Records	411 W. Chapel Hill Street					
	(Street and Number)					
	Durham, NC 27701-3616			(919) 682-9201		
	(City or Town, State and Zip Code)			(Area Code)(Telephone Number)		
Internet Website Address	ncmutuallife.com					
Statutory Statement Contact	Kamlesh Shah			(919) 313-7807		
	(Name)			(Area Code)(Telephone Number)		
	kshah@ncmutuallife.com			(919) 313-8723		
	(E-Mail Address)			(Fax Number)		

PRINCIPAL OFFICERS***

President and Chief Executive Officer	JAMES HERBERT SPEED JR., CPA
Senior Vice President-Chief Operating Officer	RICHARD LEE HALL
Sr. Vice President of Administration/Human Resources	GRACIE ANN JOHNSON-LOPEZ, SPHR
Vice President-Accounting Services	DAVID ALAN BAYLOCK
Vice President-Corporate Actuary	STAFFORD LEROY THOMPSON, JR, FSA, MAAA
Vice President-Group Marketing	ARTHELL DAMON DAVIS
Vice President-Individual Marketing	RONALD RUSSELL CORLEW

DIRECTORS***

CAROL MOSELEY BRAUN	ERSKINE BOYCE BOWLES	JULIUS LEVONNE CHAMBERS
BERT COLLINS, Chairman	JOE LOUIS DUDLEY, SR.	NATHAN TAYLOR GARRETT, SR.
ELLIOTT SAWYER HALL	JAMES HERBERT SPEED, JR.	THEODORE WALSTEIN LONG, JR.
PHAIL WYNN JR.		

State of North Carolina

County of Durham ss

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions* and *Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)	(Signature)	(Signature)
James Herbert Speed, Jr.	Richard Curtis Barnes	David Alan Baylock
(Printed Name)	(Printed Name)	(Printed Name)
1.	2.	3.
President, CEO	Corporate Secretary	Vice President - Accounting Services
(Title)	(Title)	(Title)

Subscribed and sworn to before me this

day of

(Notary Public Signature)

a. Is this an original filing? Yes [X] No []

b. If no:

1. State the amendment number	
2. Date filed	
3. Number of pages attached	



DIRECT BUSINESS IN THE STATE OF ALABAMA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	672,942			61	673,003
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	672,942			61	673,003
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	130				130
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	221				221
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	350				350
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	350				350
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	22,000				22,000
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	4,427				4,427
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	26,427				26,427

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	74	65,262					135	8,232	209	73,494
17.	Incurred during current year	94	417,233					64	43,130	158	460,363
	Settled during current year:										
18.1	By payment in full	74	342,698							74	342,698
18.2	By payment on compromised claims										
18.3	Totals paid	74	342,698							74	342,698
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	74	342,698							74	342,698
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	94	139,797					199	51,362	293	191,159
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	620	5,808,096	(a)		1	78,199,597	11	8,580	632	84,016,273
21.	Issued during year	2,045	20,531,696							2,045	20,531,696
22.	Other changes to in force (Net)	967	(2,178,391)				(32,328,248)	(3)	(2,407)	964	(34,509,046)
23.	In force December 31 of current year	3,632	24,161,401	(a)		1	45,871,349	8	6,173	3,641	70,038,923

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)		797			
25.6	Totals (sum of Lines 25.1 to 25.5)		797			
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)		797			

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF ALASKA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance					
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 Number	2 Amount	3 No. of Ind.Pols & Group Certifs.	4 Amount	5 No. of Certi- ficates	6 Amount	7 Number	8 Amount	9 Number	10 Amount
16.	Unpaid December 31, prior year	3	100							3	100
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	100							3	100
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	13	16,043	(a)			19,904,676			13	19,920,719
21.	Issued during year										
22.	Other changes to in force (Net)						(5,274,671)				(5,274,671)
23.	In force December 31 of current year	13	16,043	(a)			14,630,005			13	14,646,048

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF ARIZONA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	448				448
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	448				448
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	1	49							1	49
17.	Incurred during current year	(1)	(49)							(1)	(49)
Settled during current year:											
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	13	29,362	(a)			68,739,510			13	68,768,872
21.	Issued during year										
22.	Other changes to in force (Net)		9,000				(21,967,827)				(21,958,827)
23.	In force December 31 of current year	13	38,362	(a)			46,771,683			13	46,810,045

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF ARKANSAS

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	231				231
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	231				231
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	(3)				(3)
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	(3)				(3)

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	21	1,131							21	1,131
17.	Incurred during current year	(6)	(155)							(6)	(155)
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	15	976							15	976
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	8	4,718	(a)			36,304,405			8	36,309,123
21.	Issued during year										
22.	Other changes to in force (Net)	1	639				(19,457,733)			1	(19,457,094)
23.	In force December 31 of current year	9	5,357	(a)			16,846,672			9	16,852,029

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF CALIFORNIA

DURING THE YEAR 2009

NAIC Group Code: 0000

LIFE INSURANCE

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	27,716		550,958		578,674
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	27,716		550,958		578,674
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	1,610				1,610
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	1,649				1,649
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	3,258				3,258
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	3,258				3,258
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	3,985				3,985
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	13,731				13,731
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	17,716				17,716

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	14	11,564							14	11,564
17.	Incurred during current year	14	31,609							14	31,609
	Settled during current year:										
18.1	By payment in full	6	30,892							6	30,892
18.2	By payment on compromised claims										
18.3	Totals paid	6	30,892							6	30,892
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	6	30,892							6	30,892
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	22	12,281							22	12,281
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	846	3,245,375	(a)			297,214,035			846	300,459,410
21.	Issued during year	3	354,153							3	354,153
22.	Other changes to in force (Net)	(48)	(509,193)				(111,900,638)			(48)	(112,409,831)
23.	In force December 31 of current year	801	3,090,335	(a)			185,313,397			801	188,403,732

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)	1,396,682	1,285,541		1,261,962	1,261,962
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)	1,220				
25.6	Totals (sum of Lines 25.1 to 25.5)	1,220				
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,397,902	1,285,541		1,261,962	1,261,962

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF COLORADO

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance					
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 Number	2 Amount	3 No. of Ind.Pols & Group Certifs.	4 Amount	5 No. of Certi- ficates	6 Amount	7 Number	8 Amount	9 Number	10 Amount
16.	Unpaid December 31, prior year	1	100							1	100
17.	Incurred during current year	2	1,007							2	1,007
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	1,107							3	1,107
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	20	23,646	(a)			64,823,854			20	64,847,500
21.	Issued during year										
22.	Other changes to in force (Net)						(20,933,839)				(20,933,839)
23.	In force December 31 of current year	20	23,646	(a)			43,890,015			20	43,913,661

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF CONNECTICUT
NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009
NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	168				168
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	168				168
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	4				4
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	13				13
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	17				17
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	17				17
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	1,000				1,000
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	1,000				1,000

DETAILS OF WRITE-INS					
1301.	.....			
1302.	.....			
1303.	.....			
1398.	Summary of remaining write-ins for Line 13 from overflow page				
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)				

1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 Number	2 Amount	3 No. of Ind.Pols & Group Certifs.	4 Amount	5 No. of Certi- ficates	6 Amount	7 Number	8 Amount	9 Number	10 Amount
16.	Unpaid December 31, prior year	2	434							2	434
17.	Incurred during current year	2	1,186							2	1,186
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	4	1,620							4	1,620
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	35	102,101	(a)			21,906,115			35	22,008,216
21.	Issued during year										
22.	Other changes to in force (Net)	(4)	(65,642)				(12,152,778)			(4)	(12,218,420)
23.	In force December 31 of current year	31	36,459	(a)			9,753,337			31	9,789,796

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF DELAWARE

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	169				169
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	169				169
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	10				10
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	52				52
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	62				62
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	62				62
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	154,046		21,159		175,205
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	(15)				(15)
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	154,031		21,159		175,190

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	3	3,264							3	3,264
	Settled during current year:										
18.1	By payment in full	1	1,609							1	1,609
18.2	By payment on compromised claims										
18.3	Totals paid	1	1,609							1	1,609
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	1	1,609							1	1,609
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	1,655							2	1,655
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	16	158,107	(a)			9,166,469			16	9,324,576
21.	Issued during year										
22.	Other changes to in force (Net)	(2)	61,371				(5,176,468)			(2)	(5,115,097)
23.	In force December 31 of current year	14	219,478	(a)			3,990,001			14	4,209,479

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA
NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009
NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	482,865			5,206	488,071
2.	Annuity considerations	7,238				7,238
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	490,103			5,206	495,309
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	5,696				5,696
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	7,381				7,381
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	13,077				13,077
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	13,077				13,077
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	371,412			7,472	378,884
10.	Matured endowments	1,489			4,897	6,386
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	168,865			2,781	171,647
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	541,766			15,151	556,917

DETAILS OF WRITE-INS					
1301.	.....			
1302.	.....			
1303.	.....			
1398.	Summary of remaining write-ins for Line 13 from overflow page				
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)				

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	175	85,851			1	500	639	47,701	815	134,052
17.	Incurred during current year	52	269,106			(1)	(500)	(2)	14,812	49	283,418
	Settled during current year:										
18.1	By payment in full	87	282,013					33	13,969	120	295,982
18.2	By payment on compromised claims										
18.3	Totals paid	87	282,013					33	13,969	120	295,982
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	87	282,013					33	13,969	120	295,982
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	140	72,944					604	48,544	744	121,488
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	3,636	24,714,935	(a)			140,431,347	3,711	1,438,220	7,347	166,584,502
21.	Issued during year	22	675,065							22	675,065
22.	Other changes to in force (Net)	(204)	(1,820,995)				43,108,716	1,004	29,320	800	41,317,041
23.	In force December 31 of current year	3,454	23,569,005	(a)			183,540,063	4,715	1,467,540	8,169	208,576,608

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)	12,890	765		2,760	2,760
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)	1,011				6
25.6	Totals (sum of Lines 25.1 to 25.5)	13,901	765		2,760	2,766
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	13,901	765		2,760	2,766

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF FLORIDA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	7,560		347,049		354,610
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	7,560		347,049		354,610
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	97				97
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	207				207
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	304				304
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	304				304
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits			50,000		50,000
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	7,164				7,164
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	7,164		50,000		57,164

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	14	794							14	794
17.	Incurred during current year	(5)	1,709			4	193,200			(1)	194,909
	Settled during current year:										
18.1	By payment in full	1	1,075			4	193,200			5	194,275
18.2	By payment on compromised claims										
18.3	Totals paid	1	1,075			4	193,200			5	194,275
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	1	1,075			4	193,200			5	194,275
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	8	1,428							8	1,428
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	55	617,523	(a)		1	278,035,662			56	278,653,185
21.	Issued during year										
22.	Other changes to in force (Net)	7	116,825			(1)	(180,058,962)			6	(179,942,137)
23.	In force December 31 of current year	62	734,348	(a)			97,976,700			62	98,711,048

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)		298			
25.6	Totals (sum of Lines 25.1 to 25.5)		298			
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)		298			

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF GEORGIA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	1,776,247		5,675	31,918	1,813,840
2.	Annuity considerations	24,042				24,042
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	1,800,288		5,675	31,918	1,837,882
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	15,204				15,204
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	34,713			(4)	34,709
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	49,917			(4)	49,912
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	49,917			(4)	49,912
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	359,138			43,523	402,661
10.	Matured endowments	3,009			8,490	11,499
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	128,548			20,955	149,503
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	490,695			72,968	563,662

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	347	112,784					1,047	121,322	1,394	234,106
17.	Incurred during current year	99	680,295					186	62,179	285	742,474
	Settled during current year:										
18.1	By payment in full	134	629,788					79	55,386	213	685,174
18.2	By payment on compromised claims										
18.3	Totals paid	134	629,788					79	55,386	213	685,174
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	134	629,788					79	55,386	213	685,174
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	312	163,291					1,154	128,115	1,466	291,406
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	7,727	86,423,775		(a).....		134,123,753	5,432	3,253,603	13,159	223,801,131
21.	Issued during year	1,220	20,306,544							1,220	20,306,544
22.	Other changes to in force (Net)	(116)	(19,668,316)				(45,900,389)	975	(7,955)	859	(65,576,660)
23.	In force December 31 of current year	8,831	87,062,003		(a).....		88,223,364	6,407	3,245,648	15,238	178,531,015

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)	670,160	670,160		282,165	361,514
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)	11,876	3,145		11,313	11,313
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)	42,220			100,223	100,935
25.6	Totals (sum of Lines 25.1 to 25.5)	54,096	3,145		111,535	112,248
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	724,256	673,305		393,700	473,761

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF HAWAII

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance					
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	2	2,665							2	2,665
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	2,665							2	2,665
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	287	442,626	(a)			34,984,064			287	35,426,690
21.	Issued during year										
22.	Other changes to in force (Net)	(13)	(25,500)				(7,497,388)			(13)	(7,522,888)
23.	In force December 31 of current year	274	417,126	(a)			27,486,676			274	27,903,802

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF IDAHO

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	27				27
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	27				27
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	5				5
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	5				5
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	5				5
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	7	7,010	(a)			19,922,699			7	19,929,709
21.	Issued during year										
22.	Other changes to in force (Net)	(1)	(1,000)				(9,061,029)			(1)	(9,062,029)
23.	In force December 31 of current year	6	6,010	(a)			10,861,670			6	10,867,680

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF ILLINOIS

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	748,001		2,281,644	48,621	3,078,265
2.	Annuity considerations	700				700
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	748,701		2,281,644	48,621	3,078,965
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	7,370				7,370
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	15,962			(63)	15,900
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	23,332			(63)	23,269
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	23,332			(63)	23,269
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	482,616		1,637,385	60,758	2,180,759
10.	Matured endowments				8,400	8,400
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	102,017			22,365	124,383
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	584,634		1,637,385	91,523	2,313,542

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	75	53,044			1	14,250	525	101,435	601	168,729
17.	Incurred during current year	117	414,175			20	1,495,676	123	72,934	260	1,982,785
	Settled during current year:										
18.1	By payment in full	98	383,579			20	1,474,926	101	68,833	219	1,927,338
18.2	By payment on compromised claims										
18.3	Totals paid	98	383,579			20	1,474,926	101	68,833	219	1,927,338
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	98	383,579			20	1,474,926	101	68,833	219	1,927,338
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	94	83,640			1	35,000	547	105,536	642	224,176
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	7,583	47,090,587	(a)		3	1,075,728,536	6,654	4,485,373	14,240	1,127,304,496
21.	Issued during year	76	1,565,139							76	1,565,139
22.	Other changes to in force (Net)	(312)	(5,127,692)			(2)	(965,625,183)	134	(103,320)	(180)	(970,856,195)
23.	In force December 31 of current year	7,347	43,528,034	(a)		1	110,103,353	6,788	4,382,053	14,136	158,013,440

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)				(2,536)	(2,536)
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)	1,946	7			
25.6	Totals (sum of Lines 25.1 to 25.5)	1,946	7			
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,946	7		(2,536)	(2,536)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF INDIANA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	1,002		17,739		18,742
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	1,002		17,739		18,742
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	106				106
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	106				106
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	106				106
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	3	950							3	950
17.	Incurred during current year	6	7,128							6	7,128
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	9	8,078							9	8,078
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	37	49,684	(a)		1	69,459,945			38	69,509,629
21.	Issued during year										
22.	Other changes to in force (Net)	2	6,545				(31,432,268)			2	(31,425,723)
23.	In force December 31 of current year	39	56,229	(a)		1	38,027,677			40	38,083,906

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)	228,268	228,268		434,376	464,018
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	228,268	228,268		434,376	464,018

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF IOWA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	110				110
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	110				110
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	24				24
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	24				24
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	24				24
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	26	29,645	(a)			28,457,316			26	28,486,961
21.	Issued during year										
22.	Other changes to in force (Net)		29				(17,817,312)				(17,817,283)
23.	In force December 31 of current year	26	29,674	(a)			10,640,004			26	10,669,678

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF KANSAS

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	301				301
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	301				301
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	23				23
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	3				3
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	26				26
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	26				26
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits			40,000		40,000
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	21				21
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	21		40,000		40,021

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	1	25							1	25
17.	Incurred during current year	1	567							1	567
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	592							2	592
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	29	31,487	(a)			35,900,127			29	35,931,614
21.	Issued during year										
22.	Other changes to in force (Net)	(1)	(1,000)				(16,836,787)			(1)	(16,837,787)
23.	In force December 31 of current year	28	30,487	(a)			19,063,340			28	19,093,827

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF KENTUCKY

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	56,572				56,572
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	56,572				56,572
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	24				24
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	24				24
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	24				24
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	682				682
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	682				682

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	4	8,975							4	8,975
17.	Incurred during current year	9	16,099							9	16,099
	Settled during current year:										
18.1	By payment in full	8	23,981							8	23,981
18.2	By payment on compromised claims										
18.3	Totals paid	8	23,981							8	23,981
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	8	23,981							8	23,981
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	5	1,093							5	1,093
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	20	105,660	(a)			46,261,089			20	46,366,749
21.	Issued during year	13	87,850							13	87,850
22.	Other changes to in force (Net)	183	727,067				(18,774,413)			183	(18,047,346)
23.	In force December 31 of current year	216	920,577	(a)			27,486,676			216	28,407,253

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)	546				
25.6	Totals (sum of Lines 25.1 to 25.5)	546				
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	546				

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF LOUISIANA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	137,757				137,757
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	137,757				137,757
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	26				26
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	85				85
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	110				110
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	110				110
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	2,000				2,000
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	5,651				5,651
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	7,651				7,651

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	5	7,163					12	1,670	17	8,833
17.	Incurred during current year	23	142,039					5	348	28	142,388
	Settled during current year:										
18.1	By payment in full	19	146,063							19	146,063
18.2	By payment on compromised claims										
18.3	Totals paid	19	146,063							19	146,063
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	19	146,063							19	146,063
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	9	3,139					17	2,018	26	5,158
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	205	3,424,104	(a)			53,288,991	16	3,690	221	56,716,785
21.	Issued during year	135	2,405,042							135	2,405,042
22.	Other changes to in force (Net)	191	(1,003,511)				(28,905,649)	(2)	(610)	189	(29,909,770)
23.	In force December 31 of current year	531	4,825,635	(a)			24,383,342	14	3,080	545	29,212,057

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)	67,864	67,864		(125)	(125)
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	67,864	67,864		(125)	(125)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF MAINE

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total					
1.	Life Insurance										
2.	Annuity considerations										
3.	Deposit-type contract funds		X X X		X X X						
4.	Other considerations										
5.	Totals (sum of Lines 1 to 4)										
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	Totals (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	Totals (sum of Lines 7.1 to 7.3)										
8.	Grand Totals (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	Totals										
DETAILS OF WRITE-INS											
1301.	.....									
1302.	.....									
1303.	.....									
1398.	Summary of remaining write-ins for Line 13 from overflow page										
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)										
1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	2	685							2	685
Settled during current year:											
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	685							2	685
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	4	3,063	(a)			19,857,358			4	19,860,421
21.	Issued during year										
22.	Other changes to in force (Net)	(1)	(1,000)				(7,444,020)			(1)	(7,445,020)
23.	In force December 31 of current year	3	2,063	(a)			12,413,338			3	12,415,401

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF MARYLAND

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	994,497			41,551	1,036,048
2.	Annuity considerations	18,186				18,186
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	1,012,683			41,551	1,054,234
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	9,336				9,336
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	33,729				33,729
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	43,064				43,064
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	43,064				43,064
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	904,211			63,079	967,290
10.	Matured endowments	4,650			213,230	217,880
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	140,017			30,159	170,177
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	1,048,879			306,468	1,355,347

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	196	142,892					531	97,267	727	240,159
17.	Incurred during current year	97	410,618					110	66,760	207	477,378
	Settled during current year:										
18.1	By payment in full	120	450,589					104	70,481	224	521,070
18.2	By payment on compromised claims										
18.3	Totals paid	120	450,589					104	70,481	224	521,070
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	120	450,589					104	70,481	224	521,070
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	173	102,921					537	93,546	710	196,467
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	7,828	74,131,127	(a)			142,517,096	5,444	3,918,391	13,272	220,566,614
21.	Issued during year	242	5,291,038							242	5,291,038
22.	Other changes to in force (Net)	(488)	(9,930,440)				(3,975,382)	486	(62,261)	(2)	(13,968,083)
23.	In force December 31 of current year	7,582	69,491,725	(a)			138,541,714	5,930	3,856,130	13,512	211,889,569

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)	5,072			4,799	5,222
25.6	Totals (sum of Lines 25.1 to 25.5)	5,072			4,799	5,222
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,072			4,799	5,222

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	458				458
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	458				458
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	112				112
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	18				18
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	130				130
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	130				130
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS					
1301.	.....			
1302.	.....			
1303.	.....			
1398.	Summary of remaining write-ins for Line 13 from overflow page				
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)				

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	7	888							7	888
17.	Incurred during current year	3	996							3	996
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	10	1,884							10	1,884
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	41	82,281	(a)			50,804,413			41	50,886,694
21.	Issued during year										
22.	Other changes to in force (Net)	(3)	(1,986)				(18,441,069)			(3)	(18,443,055)
23.	In force December 31 of current year	38	80,295	(a)			32,363,344			38	32,443,639

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF MICHIGAN

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	829,297			67,114	896,411
2.	Annuity considerations	10,695				10,695
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	839,992			67,114	907,107
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	3,343				3,343
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	16,771			(10)	16,760
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	20,114			(10)	20,104
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	20,114			(10)	20,104
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	744,555		4,500	91,123	840,178
10.	Matured endowments	14,848			3,721	18,569
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	151,055			43,853	194,907
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	910,458		4,500	138,696	1,053,654

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	91	100,444					640	178,864	731	279,308
17.	Incurred during current year	75	567,064					139	110,518	214	677,581
	Settled during current year:										
18.1	By payment in full	104	577,992					122	93,607	226	671,599
18.2	By payment on compromised claims										
18.3	Totals paid	104	577,992					122	93,607	226	671,599
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	104	577,992					122	93,607	226	671,599
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	62	89,516					657	195,775	719	285,290
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	7,747	52,968,090	(a)			74,360,795	12,124	7,441,544	19,871	134,770,429
21.	Issued during year	162	3,004,334							162	3,004,334
22.	Other changes to in force (Net)	(481)	(6,747,266)				(41,775,784)	253	(104,563)	(228)	(48,627,613)
23.	In force December 31 of current year	7,428	49,225,158	(a)			32,585,011	12,377	7,336,981	19,805	89,147,150

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)	2,484	1,945		10,595	10,595
25.2	Guaranteed renewable (b)	785	255			
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)	3,353	574		1,600	1,605
25.6	Totals (sum of Lines 25.1 to 25.5)	6,623	2,775		12,195	12,200
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	6,623	2,775		12,195	12,200

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF MINNESOTA
NAIC Group Code: 0000

LIFE INSURANCE
DURING THE YEAR 2009
NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	(199)				(199)
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	(199)				(199)
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	6				6
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	6				6
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	6				6
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS

1301.	.....			
1302.	.....			
1303.	.....			
1398.	Summary of remaining write-ins for Line 13 from overflow page				
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)				

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	2	115							2	115
17.	Incurred during current year	26	10,651							26	10,651
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	28	10,766							28	10,766
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	1,503	1,944,346	(a)			43,424,045			1,503	45,368,391
21.	Issued during year										
22.	Other changes to in force (Net)	(86)	(122,172)				(22,809,038)			(86)	(22,931,210)
23.	In force December 31 of current year	1,417	1,822,174	(a)			20,615,007			1,417	22,437,181

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF MISSISSIPPI
NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009
NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	469,162				469,162
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	469,162				469,162
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	33,000				33,000
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	3,316				3,316
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	36,316				36,316

DETAILS OF WRITE-INS					
1301.	.....			
1302.	.....			
1303.	.....			
1398.	Summary of remaining write-ins for Line 13 from overflow page				
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)				

1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 Number	2 Amount	3 No. of Ind.Pols & Group Certifs.	4 Amount	5 No. of Certi- ficates	6 Amount	7 Number	8 Amount	9 Number	10 Amount
16.	Unpaid December 31, prior year	12	22,729							12	22,729
17.	Incurred during current year	48	253,483							48	253,483
	Settled during current year:										
18.1	By payment in full	51	240,983							51	240,983
18.2	By payment on compromised claims										
18.3	Totals paid	51	240,983							51	240,983
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	51	240,983							51	240,983
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	9	35,229							9	35,229
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	432	5,685,666		(a).....		43,863,090			432	49,548,756
21.	Issued during year	371	5,133,942							371	5,133,942
22.	Other changes to in force (Net)	808	228,181				(21,474,749)			808	(21,246,568)
23.	In force December 31 of current year	1,611	11,047,789		(a).....		22,388,341			1,611	33,436,130

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF MISSOURI

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	1,475				1,475
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	1,475				1,475
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	575				575
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	52				52
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	627				627
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	627				627
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	5,007				5,007
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	5,007				5,007

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	4	483							4	483
17.	Incurred during current year	468	39,785							468	39,785
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	472	40,268							472	40,268
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	4,841	2,159,771	(a)			72,543,151			4,841	74,702,922
21.	Issued during year										
22.	Other changes to in force (Net)	(207)	(88,480)				(29,318,136)			(207)	(29,406,616)
23.	In force December 31 of current year	4,634	2,071,291	(a)			43,225,015			4,634	45,296,306

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)	5	5			
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)	10				
25.6	Totals (sum of Lines 25.1 to 25.5)	15	5			
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	15	5			

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF MONTANA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total					
1.	Life Insurance										
2.	Annuity considerations										
3.	Deposit-type contract funds		X X X		X X X						
4.	Other considerations										
5.	Totals (sum of Lines 1 to 4)										
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	Totals (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	Totals (sum of Lines 7.1 to 7.3)										
8.	Grand Totals (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	Totals										
DETAILS OF WRITE-INS											
1301.	.....									
1302.	.....									
1303.	.....									
1398.	Summary of remaining write-ins for Line 13 from overflow page										
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)										
1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	1	39							1	39
17.	Incurred during current year	1	75							1	75
Settled during current year:											
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	114							2	114
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	6	6,778	(a)			19,541,595			6	19,548,373
21.	Issued during year										
22.	Other changes to in force (Net)	(1)	(1,000)				(7,349,924)			(1)	(7,350,924)
23.	In force December 31 of current year	5	5,778	(a)			12,191,671			5	12,197,449

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF NEBRASKA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance					
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	1	491							1	491
Settled during current year:											
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	491							1	491
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	1	654	(a)			22,998,573			1	22,999,227
21.	Issued during year										
22.	Other changes to in force (Net)						(11,250,236)				(11,250,236)
23.	In force December 31 of current year	1	654	(a)			11,748,337			1	11,748,991

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF NEVADA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	79				79
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	79				79
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	24				24
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	24				24
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	24				24
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	42	163,377	(a)			24,171,822			42	24,335,199
21.	Issued during year										
22.	Other changes to in force (Net)	(6)	(109,500)				(11,536,818)			(6)	(11,646,318)
23.	In force December 31 of current year	36	53,877	(a)			12,635,004			36	12,688,881

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF NEW HAMPSHIRE
NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009
NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	118				118
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	118				118
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	37				37
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	37				37
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	37				37
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS					
1301.	.....			
1302.	.....			
1303.	.....			
1398.	Summary of remaining write-ins for Line 13 from overflow page				
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)				

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	2	111							2	111
Settled during current year:											
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	111							2	111
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	8	9,677	(a).....			12,553,923			8	12,563,600
21.	Issued during year										
22.	Other changes to in force (Net)						(7,233,921)				(7,233,921)
23.	In force December 31 of current year	8	9,677	(a).....			5,320,002			8	5,329,679

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF NEW JERSEY

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	491,092			3,036	494,128
2.	Annuity considerations	2,326				2,326
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	493,418			3,036	496,454
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	8,696				8,696
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	18,399				18,399
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	27,095				27,095
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	27,095				27,095
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	154,706			2,472	157,178
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	102,166			1,667	103,833
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	256,872			4,139	261,011

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	54	101,165					35	6,807	89	107,972
17.	Incurred during current year	25	256,256					(3)	3,372	22	259,627
	Settled during current year:										
18.1	By payment in full	50	309,153					3	2,472	53	311,625
18.2	By payment on compromised claims										
18.3	Totals paid	50	309,153					3	2,472	53	311,625
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	50	309,153					3	2,472	53	311,625
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	29	48,268					29	7,707	58	55,974
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	3,664	37,106,023		(a).....		59,963,799	419	394,455	4,083	97,464,277
21.	Issued during year	219	5,367,413							219	5,367,413
22.	Other changes to in force (Net)	(185)	(6,317,197)				(24,718,787)	(12)	(16,908)	(197)	(31,052,892)
23.	In force December 31 of current year	3,698	36,156,239		(a).....		35,245,012	407	377,547	4,105	71,778,798

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)	2,871			1,405	1,405
25.6	Totals (sum of Lines 25.1 to 25.5)	2,871			1,405	1,405
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,871			1,405	1,405

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF NEW MEXICO

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total					
1.	Life Insurance										
2.	Annuity considerations										
3.	Deposit-type contract funds		X X X		X X X						
4.	Other considerations										
5.	Totals (sum of Lines 1 to 4)										
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	Totals (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	Totals (sum of Lines 7.1 to 7.3)										
8.	Grand Totals (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	Totals										
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)											
1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	2	111							2	111
Settled during current year:											
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	111							2	111
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	10	8,039	(a)			36,684,229			10	36,692,268
21.	Issued during year										
22.	Other changes to in force (Net)						(6,980,885)				(6,980,885)
23.	In force December 31 of current year	10	8,039	(a)			29,703,344			10	29,711,383

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF NEW YORK

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	7,053				7,053
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	7,053				7,053
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	747				747
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	691				691
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	1,438				1,438
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	1,438				1,438
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	37,618				37,618
10.	Matured endowments	5,000				5,000
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	1,370				1,370
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	43,988				43,988

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	82	29,325							82	29,325
17.	Incurred during current year	17	25,416							17	25,416
	Settled during current year:										
18.1	By payment in full	9	18,043							9	18,043
18.2	By payment on compromised claims										
18.3	Totals paid	9	18,043							9	18,043
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	9	18,043							9	18,043
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	90	36,698							90	36,698
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	424	944,246		(a).....		141,128,155			424	142,072,401
21.	Issued during year										
22.	Other changes to in force (Net)	(26)	(29,400)				(62,436,461)			(26)	(62,465,861)
23.	In force December 31 of current year	398	914,846		(a).....		78,691,694			398	79,606,540

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)		178			
25.6	Totals (sum of Lines 25.1 to 25.5)		178			
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)		178			

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1	2	3	4	5
		Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1.	Life Insurance	3,996,369		274,496	104,829	4,375,694
2.	Annuity considerations	167,434				167,434
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	4,163,804		274,496	104,829	4,543,128
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	38,765				38,765
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	99,983			(33)	99,949
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	138,748			(33)	138,714
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	138,748			(33)	138,714
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	1,670,813		810,553	293,544	2,774,910
10.	Matured endowments	13,773			21,548	35,321
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	608,464			147,991	756,454
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	2,293,049		810,553	463,083	3,566,686

DETAILS OF WRITE-INS					
1301.	.....			
1302.	.....			
1303.	.....			
1398.	Summary of remaining write-ins for Line 13 from overflow page				
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)				

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	763	255,214			11	187,250	18,248	1,498,357	19,022	1,940,821
17.	Incurred during current year	385	1,788,373			21	246,500	1,756	460,547	2,162	2,495,421
	Settled during current year:										
18.1	By payment in full	385	1,763,243			21	293,900	476	326,060	882	2,383,203
18.2	By payment on compromised claims										
18.3	Totals paid	385	1,763,243			21	293,900	476	326,060	882	2,383,203
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	385	1,763,243			21	293,900	476	326,060	882	2,383,203
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	763	280,344			11	139,850	19,528	1,632,844	20,302	2,053,039
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	25,579	262,346,031		(a)	5	249,996,630	110,423	35,121,681	136,007	547,464,342
21.	Issued during year	1,272	19,909,069				402,000			1,272	20,311,069
22.	Other changes to in force (Net)	(5,831)	(32,239,757)			(2)	(181,083,748)	2,712	10,525,899	(3,121)	(202,797,606)
23.	In force December 31 of current year	21,020	250,015,343		(a)	3	69,314,882	113,135	45,647,580	134,158	364,977,805

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)	827,932	784,326		643,648	724,192
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)	22,099	17,517		15,483	15,483
25.3	Non-renewable for stated reasons only (b)		(18)			
25.4	Other accident only					
25.5	All other (b)	105,883	(18)		120,010	118,349
25.6	Totals (sum of Lines 25.1 to 25.5)	127,982	17,481		135,493	133,832
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	955,915	801,807		779,140	858,024

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA
NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009
NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance					
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS						
1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 Number	2 Amount	3 No. of Ind.Pols & Group Certifs.	4 Amount	5 No. of Certi- ficates	6 Amount	7 Number	8 Amount	9 Number	10 Amount
16.	Unpaid December 31, prior year	1	1,049							1	1,049
17.	Incurred during current year		0								0
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	1,049							1	1,049
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	18	16,293	(a)			11,902,763			18	11,919,056
21.	Issued during year										
22.	Other changes to in force (Net)	(3)	(6,000)				(4,366,094)			(3)	(4,372,094)
23.	In force December 31 of current year	15	10,293	(a)			7,536,669			15	7,546,962

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF OHIO

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	26,204		1,550		27,754
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	26,204		1,550		27,754
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	753				753
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	687				687
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	1,440				1,440
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	1,440				1,440
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	6,038				6,038
10.	Matured endowments	5,911				5,911
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	15,781				15,781
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	27,730				27,730

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	30	6,817					38	2,289	68	9,106
17.	Incurred during current year	9	49,865					(2)	(150)	7	49,715
	Settled during current year:										
18.1	By payment in full	10	36,376							10	36,376
18.2	By payment on compromised claims										
18.3	Totals paid	10	36,376							10	36,376
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	10	36,376							10	36,376
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	29	20,306					36	2,139	65	22,445
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	593	1,854,464	(a)		1	110,624,681	40	25,339	634	112,504,484
21.	Issued during year										
22.	Other changes to in force (Net)	19	90,648				(53,334,661)	(1)	(500)	18	(53,244,513)
23.	In force December 31 of current year	612	1,945,112	(a)		1	57,290,020	39	24,839	652	59,259,971

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)		164			
25.6	Totals (sum of Lines 25.1 to 25.5)		164			
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)		164			

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF OKLAHOMA

DURING THE YEAR 2009

NAIC Group Code: 0000

LIFE INSURANCE

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	178				178
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	178				178
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	37				37
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	37				37
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	37				37
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	12	638							12	638
17.	Incurred during current year	(3)	343							(3)	343
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	9	981							9	981
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	37	42,749	(a)			63,460,697			37	63,503,446
21.	Issued during year										
22.	Other changes to in force (Net)	(4)	(4,000)				(21,565,683)			(4)	(21,569,683)
23.	In force December 31 of current year	33	38,749	(a)			41,895,014			33	41,933,763

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF OREGON

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life Insurance	19					19
2. Annuity considerations						
3. Deposit-type contract funds			X X X		X X X	
4. Other considerations						
5. Totals (sum of Lines 1 to 4)	19					19
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1 Paid in cash or left on deposit						
6.2 Applied to pay renewal premiums						
6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period	6					6
6.4 Other						
6.5 Totals (sum of Lines 6.1 to 6.4)	6					6
Annuities:						
7.1 Paid in cash or left on deposit						
7.2 Applied to provide paid-up annuities						
7.3 Other						
7.4 Totals (sum of Lines 7.1 to 7.3)						
8. Grand Totals (Lines 6.5 plus 7.4)	6					6
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						
10. Matured endowments						
11. Annuity benefits						
12. Surrender values and withdrawals for life contracts						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid						
14. All other benefits, except accident and health						
15. Totals						

DETAILS OF WRITE-INS

1301.					
1302.					
1303.					
1398. Summary of remaining write-ins for Line 13 from overflow page					
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16. Unpaid December 31, prior year											
17. Incurred during current year	1		567							1	567
Settled during current year:											
18.1 By payment in full											
18.2 By payment on compromised claims											
18.3 Totals paid											
18.4 Reduction by compromise											
18.5 Amount rejected											
18.6 Total settlements											
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1		567							1	567
POLICY EXHIBIT						No. of Policies					
20. In force December 31, prior year	22		20,414	(a)			41,127,763			22	41,148,177
21. Issued during year											
22. Other changes to in force (Net)	(2)		(992)				(16,744,421)			(2)	(16,745,413)
23. In force December 31 of current year	20		19,422	(a)			24,383,342			20	24,402,764

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)						
24.1 Federal Employees Health Benefits Program Premium (b)						
24.2 Credit (Group and Individual)						
24.3 Collectively Renewable Policies (b)						
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies						
25.1 Non-cancelable (b)						
25.2 Guaranteed renewable (b)						
25.3 Non-renewable for stated reasons only (b)						
25.4 Other accident only						
25.5 All other (b)						
25.6 Totals (sum of Lines 25.1 to 25.5)						
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)						

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	1,111,624		18,277	53,688	1,183,589
2.	Annuity considerations	3,380				3,380
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	1,115,004		18,277	53,688	1,186,969
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	12,049				12,049
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	33,064			17	33,080
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	45,113			17	45,130
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	45,113			17	45,130
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	766,167		8,000	77,910	852,077
10.	Matured endowments	2,227			4,626	6,853
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	193,616			30,100	223,716
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	962,009		8,000	112,637	1,082,646

DETAILS OF WRITE-INS					
1301.	.....			
1302.	.....			
1303.	.....			
1398.	Summary of remaining write-ins for Line 13 from overflow page				
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)				

1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	139134,346					1,142	155,025	1,281	289,371
17.	Incurred during current year	178679,314			5	29,160	211	95,569	394	804,043
	Settled during current year:									
18.1	By payment in full	147627,640			5	29,160	106	82,811	258	739,611
18.2	By payment on compromised claims									
18.3	Totals paid	147627,640			5	29,160	106	82,811	258	739,611
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	Total settlements	147627,640			5	29,160	106	82,811	258	739,611
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	170186,020					1,247	167,783	1,417	353,803
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	10,25564,941,443		(a)	2	137,095,410	10,168	6,145,255	20,425	208,182,108
21.	Issued during year	1983,677,511							198	3,677,511
22.	Other changes to in force (Net)	(520)(6,995,310)				(54,689,831)	1,533	(113,039)	1,013	(61,798,180)
23.	In force December 31 of current year	9,93361,623,644		(a)	2	82,405,579	11,701	6,032,216	21,636	150,061,439

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)	371				
25.3	Non-renewable for stated reasons only (b)		106			
25.4	Other accident only					
25.5	All other (b)	5,971	106		5,590	5,200
25.6	Totals (sum of Lines 25.1 to 25.5)	6,341	212		5,590	5,200
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	6,341	212		5,590	5,200

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF RHODE ISLAND

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance					
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	2	217							2	217
17.	Incurred during current year	(2)	(217)							(2)	(217)
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	7	7,424	(a)			12,267,130			7	12,274,554
21.	Issued during year										
22.	Other changes to in force (Net)						(4,065,461)				(4,065,461)
23.	In force December 31 of current year	7	7,424	(a)			8,201,669			7	8,209,093

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	745,379		1,252	45,911	792,542
2.	Annuity considerations	4,820				4,820
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	750,199		1,252	45,911	797,362
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	15,641				15,641
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	21,754			(2)	21,752
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	37,395			(2)	37,393
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	37,395			(2)	37,393
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	270,067			61,760	331,827
10.	Matured endowments	3,091			12,616	15,707
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	120,957			27,051	148,008
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	394,116			101,427	495,542

DETAILS OF WRITE-INS					
1301.	.....			
1302.	.....			
1303.	.....			
1398.	Summary of remaining write-ins for Line 13 from overflow page				
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)				

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	480	93,665					1,201	134,005	1,681	227,670
17.	Incurred during current year	(10)	408,403					82	76,897	72	485,299
	Settled during current year:										
18.1	By payment in full	120	376,006					102	80,187	222	456,193
18.2	By payment on compromised claims	4	1,641							4	1,641
18.3	Totals paid	124	377,647					102	80,187	226	457,834
18.4	Reduction by compromise		23,359								23,359
18.5	Amount rejected										
18.6	Total settlements	124	401,006					102	80,187	226	481,193
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	346	101,062					1,181	130,715	1,527	231,776
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	7,691	38,263,115	(a)			58,899,662	7,107	5,156,597	14,798	102,319,374
21.	Issued during year	169	2,098,912							169	2,098,912
22.	Other changes to in force (Net)	241	(1,324,324)				(34,959,654)	732	(76,547)	973	(36,360,525)
23.	In force December 31 of current year	8,101	39,037,703	(a)			23,940,008	7,839	5,080,050	15,940	68,057,761

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)	3,088	2,848			183
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)	43,650			39,898	38,209
25.6	Totals (sum of Lines 25.1 to 25.5)	46,737	2,848		39,898	38,392
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	46,737	2,848		39,898	38,392

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance					
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS					
1301.	.....			
1302.	.....			
1303.	.....			
1398.	Summary of remaining write-ins for Line 13 from overflow page				
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)				

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	2	735							2	735
Settled during current year:											
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	735							2	735
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	17	22,736	(a)			15,376,803			17	15,399,539
21.	Issued during year										
22.	Other changes to in force (Net)	(2)	(735)				(5,623,466)			(2)	(5,624,201)
23.	In force December 31 of current year	15	22,001	(a)			9,753,337			15	9,775,338

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF TENNESSEE

DURING THE YEAR 2009

NAIC Group Code: 0000

LIFE INSURANCE

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	563,333			18,057	581,390
2.	Annuity considerations	11,706				11,706
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	575,039			18,057	593,096
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	7,182				7,182
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	8,766			5	8,772
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	15,949			5	15,954
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	15,949			5	15,954
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	274,661			25,335	299,996
10.	Matured endowments				6,621	6,621
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	80,960			21,817	102,778
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	355,622			53,773	409,395

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	254	81,076					599	70,861	853	151,937
17.	Incurred during current year	75	202,607					135	45,123	210	247,730
	Settled during current year:										
18.1	By payment in full	60	174,223					50	35,328	110	209,551
18.2	By payment on compromised claims										
18.3	Totals paid	60	174,223					50	35,328	110	209,551
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	60	174,223					50	35,328	110	209,551
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	269	109,460					684	80,656	953	190,116
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	4,000	30,926,945		(a).....		64,482,011	3,390	2,286,199	7,390	97,695,155
21.	Issued during year	580	7,580,789							580	7,580,789
22.	Other changes to in force (Net)	(87)	(5,867,071)				(31,897,000)	445	(40,511)	358	(37,804,582)
23.	In force December 31 of current year	4,493	32,640,663		(a).....		32,585,011	3,835	2,245,688	8,328	67,471,362

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)	25,675	25,675		75,653	69,923
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)	277				
25.2	Guaranteed renewable (b)	2,608	1,951			
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)	16,975	277		24,023	23,486
25.6	Totals (sum of Lines 25.1 to 25.5)	19,861	2,228		24,023	23,486
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	45,536	27,903		99,677	93,410

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF TEXAS

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	106,507				106,507
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	106,507				106,507
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	50				50
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	248				248
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	298				298
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	298				298
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	8,999				8,999
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	8,999				8,999

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	4	931			1	10,000			5	10,931
17.	Incurred during current year	40	190,894					4	666	44	191,561
	Settled during current year:										
18.1	By payment in full	14	71,000							14	71,000
18.2	By payment on compromised claims										
18.3	Totals paid	14	71,000							14	71,000
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	14	71,000							14	71,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	30	120,825			1	10,000	4	666	35	131,492
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	196	3,541,796		(a).....		272,314,432			196	275,856,228
21.	Issued during year	1	25,000							1	25,000
22.	Other changes to in force (Net)	194	1,065,388				(117,591,045)			194	(116,525,657)
23.	In force December 31 of current year	391	4,632,184		(a).....		154,723,387			391	159,355,571

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)	(40)	(40)		26,234	21,538
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	(40)	(40)		26,234	21,538

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF UTAH

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance					
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
17.	Incurred during current year .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	Settled during current year:										
18.1	By payment in full .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
18.2	By payment on compromised claims .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
18.3	Totals paid .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
18.4	Reduction by compromise .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
18.5	Amount rejected .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
18.6	Total settlements .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	18	18,955	(a).....			40,415,130	.....		18	40,434,085
21.	Issued during year										
22.	Other changes to in force (Net)	(3)	(6,000)				(7,165,119)			(3)	(7,171,119)
23.	In force December 31 of current year	15	12,955	(a).....			33,250,011	.....		15	33,262,966

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF VERMONT

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total					
1.	Life Insurance										
2.	Annuity considerations										
3.	Deposit-type contract funds		X X X		X X X						
4.	Other considerations										
5.	Totals (sum of Lines 1 to 4)										
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	Totals (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	Totals (sum of Lines 7.1 to 7.3)										
8.	Grand Totals (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	Totals										
DETAILS OF WRITE-INS											
1301.	.....									
1302.	.....									
1303.	.....									
1398.	Summary of remaining write-ins for Line 13 from overflow page										
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)										
1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	2	1,008							2	1,008
Settled during current year:											
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	1,008							2	1,008
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	13	11,587	(a)			8,318,962			13	8,330,549
21.	Issued during year										
22.	Other changes to in force (Net)						(2,998,960)				(2,998,960)
23.	In force December 31 of current year	13	11,587	(a)			5,320,002			13	5,331,589

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF VIRGINIA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1	2	3	4	5
		Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1.	Life Insurance	849,524			74,617	924,141
2.	Annuity considerations	10,198				10,198
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	859,722			74,617	934,339
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	10,056				10,056
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	20,295			37	20,332
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	30,350			37	30,387
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	30,350			37	30,387
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	558,352			90,300	648,652
10.	Matured endowments	15,367			7,418	22,785
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	160,477			31,455	191,932
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	734,196			129,174	863,370

DETAILS OF WRITE-INS					
1301.	.....			
1302.	.....			
1303.	.....			
1398.	Summary of remaining write-ins for Line 13 from overflow page				
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)				

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	534	204,057					2,046	201,747	2,580	405,804
17.	Incurred during current year	87	603,672					263	105,568	350	709,240
	Settled during current year:										
18.1	By payment in full	182	624,298					145	91,653	327	715,951
18.2	By payment on compromised claims										
18.3	Totals paid	182	624,298					145	91,653	327	715,951
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements	182	624,298					145	91,653	327	715,951
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	439	183,431					2,164	215,662	2,603	399,093
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	10,408	52,442,738		(a).....		191,544,730	11,420	6,212,666	21,828	250,200,134
21.	Issued during year	163	4,959,992							163	4,959,992
22.	Other changes to in force (Net)	(620)	(7,815,328)				(32,831,342)	1,751	(30,201)	1,131	(40,676,871)
23.	In force December 31 of current year	9,951	49,587,402		(a).....		158,713,388	13,171	6,182,465	23,122	214,483,255

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)	5,299	4,600		1,240	1,240
25.3	Non-renewable for stated reasons only (b)		6			
25.4	Other accident only					
25.5	All other (b)	45,359	6		12,592	12,827
25.6	Totals (sum of Lines 25.1 to 25.5)	50,658	4,612		13,832	14,067
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	50,658	4,612		13,832	14,067

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF WASHINGTON

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	517				517
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	517				517
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	146				146
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	24				24
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	169				169
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	169				169
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	1,000				1,000
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	1,000				1,000

DETAILS OF WRITE-INS

1301.	.....				
1302.	.....				
1303.	.....				
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	2	1,545							2	1,545
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	1,545							2	1,545
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	27	47,208	(a)			92,305,237			27	92,352,445
21.	Issued during year										
22.	Other changes to in force (Net)		8				(29,573,549)				(29,573,541)
23.	In force December 31 of current year	27	47,216	(a)			62,731,688			27	62,778,904

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA

DURING THE YEAR 2009

NAIC Group Code: 0000

LIFE INSURANCE

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total					
1.	Life Insurance										
2.	Annuity considerations										
3.	Deposit-type contract funds		X X X		X X X						
4.	Other considerations										
5.	Totals (sum of Lines 1 to 4)										
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	Totals (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	Totals (sum of Lines 7.1 to 7.3)										
8.	Grand Totals (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	Totals										
DETAILS OF WRITE-INS											
1301.	.....									
1302.	.....									
1303.	.....									
1398.	Summary of remaining write-ins for Line 13 from overflow page										
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)										
1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	3	212							3	212
17.	Incurred during current year	(1)	8							(1)	8
Settled during current year:											
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	220							2	220
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	7	25,163	(a)			27,746,612			7	27,771,775
21.	Issued during year										
22.	Other changes to in force (Net)	(2)	(21,000)				(9,569,939)			(2)	(9,590,939)
23.	In force December 31 of current year	5	4,163	(a)			18,176,673			5	18,180,836

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF WISCONSIN
NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009
NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	38				38
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	38				38
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	48				48
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	48				48
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	48				48
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS

1301.	.....			
1302.	.....			
1303.	.....			
1398.	Summary of remaining write-ins for Line 13 from overflow page				
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)				

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	1	1,240							1	1,240
17.	Incurred during current year	3	642							3	642
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	4	1,882							4	1,882
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	36	43,440	(a)			44,220,050			36	44,263,490
21.	Issued during year										
22.	Other changes to in force (Net)	(1)	(500)				(27,151,711)			(1)	(27,152,211)
23.	In force December 31 of current year	35	42,940	(a)			17,068,339			35	17,111,279

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF WYOMING

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance										
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	Totals (sum of Lines 1 to 4)										
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	Totals (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	Totals (sum of Lines 7.1 to 7.3)										
8.	Grand Totals (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	Totals										
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)											
1				Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	3	3,686	(a)			10,232,211			3	10,235,897
21.	Issued during year										
22.	Other changes to in force (Net)						(3,582,209)				(3,582,209)
23.	In force December 31 of current year	3	3,686	(a)			6,650,002			3	6,653,688

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF AMERICAN SAMOA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance					
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS					
1301.	write-in description 1 for line 13				
1302.	write-in description 2 for line 13				
1303.	write-in description 3 for line 13				
1398.	Summary of remaining write-ins for Line 13 from overflow page				
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)				

1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year			(a)							
21.	Issued during year										
22.	Other changes to in force (Net)										
23.	In force December 31 of current year			(a)							

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products2,711, and number of persons insured under indemnity only products8,081.



DIRECT BUSINESS IN THE STATE OF GUAM

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total					
1.	Life Insurance										
2.	Annuity considerations										
3.	Deposit-type contract funds		X X X		X X X						
4.	Other considerations										
5.	Totals (sum of Lines 1 to 4)										
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	Totals (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	Totals (sum of Lines 7.1 to 7.3)										
8.	Grand Totals (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	Totals										
DETAILS OF WRITE-INS											
1301. write-in description 1 for line 13											
1302. write-in description 2 for line 13											
1303. write-in description 3 for line 13											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)											
1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	1	1,000	(a)			3,722,207			1	3,723,207
21.	Issued during year										
22.	Other changes to in force (Net)						(3,722,207)				(3,722,207)
23.	In force December 31 of current year	1	1,000	(a)						1	1,000

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF PUERTO RICO

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance										
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	Totals (sum of Lines 1 to 4)										
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	Totals (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	Totals (sum of Lines 7.1 to 7.3)										
8.	Grand Totals (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	Totals										
DETAILS OF WRITE-INS											
1301. write-in description 1 for line 13											
1302. write-in description 2 for line 13											
1303. write-in description 3 for line 13											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)											
1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	3	3,000	(a)			17,661,493			3	17,664,493
21.	Issued during year										
22.	Other changes to in force (Net)						(17,661,493)				(17,661,493)
23.	In force December 31 of current year	3	3,000	(a)						3	3,000

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF U.S. VIRGIN ISLANDS

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance					
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals					

DETAILS OF WRITE-INS					
1301.	write-in description 1 for line 13				
1302.	write-in description 2 for line 13				
1303.	write-in description 3 for line 13				
1398.	Summary of remaining write-ins for Line 13 from overflow page				
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)				

1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year			(a).....			1,424,314				1,424,314
21.	Issued during year										
22.	Other changes to in force (Net)						(1,424,314)				(1,424,314)
23.	In force December 31 of current year			(a).....							

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of
persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF CANADA

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance										
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	Totals (sum of Lines 1 to 4)										
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	Totals (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	Totals (sum of Lines 7.1 to 7.3)										
8.	Grand Totals (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	Totals										
DETAILS OF WRITE-INS											
1301. write-in description 1 for line 13											
1302. write-in description 2 for line 13											
1303. write-in description 3 for line 13											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)											
1				Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	3	2,779	(a)						3	2,779
21.	Issued during year										
22.	Other changes to in force (Net)										
23.	In force December 31 of current year	3	2,779	(a)						3	2,779

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF OTHER ALIEN

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance										
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	Totals (sum of Lines 1 to 4)										
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	Totals (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	Totals (sum of Lines 7.1 to 7.3)										
8.	Grand Totals (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	Totals										
DETAILS OF WRITE-INS											
1301. write-in description 1 for line 13											
1302. write-in description 2 for line 13											
1303. write-in description 3 for line 13											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)											
1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	Totals paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	Total settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year			(a).....			8,450,930				8,450,930
21.	Issued during year										
22.	Other changes to in force (Net)						(8,450,930)				(8,450,930)
23.	In force December 31 of current year			(a).....							

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums		2 Direct Premiums Earned		3 Dividends Paid Or Credited On Direct Business		4 Direct Losses Paid		5 Direct Losses Incurred	
24.	Group Policies (b)										
24.1	Federal Employees Health Benefits Program Premium (b)										
24.2	Credit (Group and Individual)										
24.3	Collectively Renewable Policies (b)										
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies										
25.1	Non-cancelable (b)										
25.2	Guaranteed renewable (b)										
25.3	Non-renewable for stated reasons only (b)										
25.4	Other accident only										
25.5	All other (b)										
25.6	Totals (sum of Lines 25.1 to 25.5)										
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)										

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF **GRAND TOTAL**

NAIC Group Code: 0000

LIFE INSURANCE

DURING THE YEAR 2009

NAIC Company Code: 67032

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	14,104,842		3,498,641	494,609	18,098,092
2.	Annuity considerations	260,726				260,726
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	Totals (sum of Lines 1 to 4)	14,365,567		3,498,641	494,609	18,358,817
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit	137,749				137,749
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period	314,952			(54)	314,898
6.4	Other					
6.5	Totals (sum of Lines 6.1 to 6.4)	452,700			(54)	452,647
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)	452,700			(54)	452,647
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	6,817,385		2,571,597	817,276	10,206,259
10.	Matured endowments	69,365			291,567	360,932
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	2,023,274			380,194	2,403,468
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	8,910,025		2,571,597	1,489,038	12,970,660

DETAILS OF WRITE-INS

1301.	write-in description 1 for line 13					
1302.	write-in description 2 for line 13					
1303.	write-in description 3 for line 13					
1398.	Summary of remaining write-ins for Line 13 from overflow page					
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)					

1		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year	3,412	1,525,768			14	212,000	26,838	2,625,582	30,264	4,363,350
17.	Incurred during current year	1,947	7,481,380			49	1,964,036	3,071	1,158,273	5,067	10,603,688
	Settled during current year:										
18.1	By payment in full	1,680	7,111,244			50	1,991,186	1,321	920,787	3,051	10,023,217
18.2	By payment on compromised claims	4	1,641							4	1,641
18.3	Totals paid	1,684	7,112,885			50	1,991,186	1,321	920,787	3,055	10,024,858
18.4	Reduction by compromise		23,359								23,359
18.5	Amount rejected										
18.6	Total settlements	1,684	7,136,244			50	1,991,186	1,321	920,787	3,055	10,048,217
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3,675	1,870,904			13	184,850	28,588	2,863,068	32,276	4,918,822
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	106,668	802,120,588		(a)	14	4,760,854,092	176,359	75,891,593	283,041	5,638,866,273
21.	Issued during year	6,891	102,973,489				402,000			6,891	103,375,489
22.	Other changes to in force (Net)	(6,647)	(105,724,997)			(5)	(2,454,790,913)	10,007	9,996,397	3,355	(2,550,519,513)
23.	In force December 31 of current year	106,912	799,369,080		(a)	9	2,306,465,179	186,366	85,887,990	293,287	3,191,722,249

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)	3,216,541	3,061,794		2,721,377	2,900,485
24.1	Federal Employees Health Benefits Program Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)	2,761	1,945		10,595	10,595
25.2	Guaranteed renewable (b)	59,021	31,086		30,795	30,978
25.3	Non-renewable for stated reasons only (b)		95			
25.4	Other accident only					
25.5	All other (b)	277,524	953		310,140	307,244
25.6	Totals (sum of Lines 25.1 to 25.5)	339,307	34,078		351,530	348,817
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,555,848	3,095,872		3,072,907	3,249,302

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products2,711, and number of persons insured under indemnity only products8,081.

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE
INTEREST MAINTENANCE RESERVE

		1
		Amount
1.	Reserve as of December 31, Prior Year	(519,032)
2.	Current Year's Realized Pre-Tax capital gains/(losses) of \$.....832,916 Transferred into the Reserve Net of Taxes of \$.....0.	832,916
3.	Adjustment for current year's liability gains/(losses) released from the reserve	
4.	Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)	313,884
5.	Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	207,925
6.	Reserve as of December 31, current year (Line 4 minus Line 5)	105,959

AMORTIZATION

		1	2	3	4
		Reserve as of December 31, Prior Year	Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	Balance Before Reduction for Current Year's Amortization (Columns 1 + 2 + 3)
Year of Amortization					
1.	2009	72,503	135,422		207,925
2.	2010	25,550	217,928		243,478
3.	2011	10,938	218,484		229,422
4.	2012	(18,315)	175,553		157,238
5.	2013	(215,177)	107,843		(107,334)
6.	2014	(48,589)	22,407		(26,182)
7.	2015	(47,926)	24,150		(23,776)
8.	2016	(59,904)	18,534		(41,370)
9.	2017	(107,820)	9,900		(97,920)
10.	2018	(109,506)	2,685		(106,821)
11.	2019	(95,210)	(5,233)		(100,443)
12.	2020	(89,681)	(6,914)		(96,595)
13.	2021	(50,737)	(6,547)		(57,284)
14.	2022	32,516	(6,539)		25,977
15.	2023	54,804	(6,660)		48,144
16.	2024	58,982	(6,791)		52,191
17.	2025	55,619	(7,089)		48,530
18.	2026	37,504	(7,563)		29,941
19.	2027	(13,160)	(8,154)		(21,314)
20.	2028	(9,015)	(8,338)		(17,353)
21.	2029	(4,700)	(7,451)		(12,151)
22.	2030	(4,746)	(6,384)		(11,130)
23.	2031	(4,257)	(5,338)		(9,595)
24.	2032	(3,736)	(4,304)		(8,040)
25.	2033	210	(3,271)		(3,061)
26.	2034	3,011	(2,229)		782
27.	2035	3,308	(1,164)		2,144
28.	2036	3,482	(80)		3,402
29.	2037	3,538	60		3,598
30.	2038	1,479			1,479
31.	2039 and later				
32.	TOTAL (Lines 1 to 31)	(519,035)	832,917		313,882

ASSET VALUATION RESERVE

		Default Component			Equity Component			7
		1	2	3	4	5	6	
		Other than Mortgage Loans	Mortgage Loans	Total (Columns 1 + 2)	Common Stock	Real Estate and Other Invested Assets	Total (Columns 4 + 5)	Total Amount (Columns 3 + 6)
1.	Reserve as of December 31, prior year	201,206	273,714	474,920	132,319	1,413	133,732	608,652
2.	Realized Capital Gains/(Losses) Net of Taxes - General Account	(2,086,497)		(2,086,497)	471,884		471,884	(1,614,613)
3.	Realized Capital Gains/(Losses) Net of Taxes - Separate Accounts							
4.	Unrealized Capital Gains/(Losses) Net of Deferred Taxes - General Account				(600,303)		(600,303)	(600,303)
5.	Unrealized Capital Gains/(Losses) Net of Deferred Taxes - Separate Accounts							
6.	Capital gains credited/(losses charged) to contract benefits, payments or reserves ..							
7.	Basic Contribution	137,829	105,530	243,359				243,359
8.	Accumulated Balances (Lines 1 through 5, minus 6 plus 7)	(1,747,462)	379,244	(1,368,218)	3,900	1,413	5,313	(1,362,905)
9.	Maximum Reserve	613,572	312,927	926,499	52,200		52,200	978,699
10.	Reserve Objective	415,643	198,297	613,940	52,200		52,200	666,140
11.	20% of (Line 10 - Line 8)	432,621	(36,189)	396,432	9,660	(283)	9,377	405,809
12.	Balance Before Transfers (Lines 8 + 11)	(1,314,841)	343,055	(971,786)	13,560	1,130	14,690	(957,096)
13.	Transfers	26,016	(26,016)					X X X
14.	Voluntary Contribution							
15.	Adjustment down to Maximum/up to Zero	1,288,825	(4,112)	1,284,713		(1,130)	(1,130)	1,283,583
16.	Reserve as of December 31, Current Year (Lines 12 + 13 + 14 + 15)		312,927	312,927	13,560	0	13,560	326,487

ASSET VALUATION RESERVE
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
DEFAULT COMPONENT

Line Number	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Columns 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Columns 4 x 5)	Factor	Amount (Columns 4 x 7)	Factor	Amount (Columns 4 x 9)
LONG-TERM BONDS												
1.		Exempt Obligations	34,354,433	X X X	X X X	34,354,433	0.0000		0.0000		0.0000	
2.	1	Highest Quality	37,214,998	X X X	X X X	37,214,998	0.0004	14,886	0.0023	85,594	0.0030	111,645
3.	2	High Quality	21,763,664	X X X	X X X	21,763,664	0.0019	41,351	0.0058	126,229	0.0090	195,873
4.	3	Medium Quality	5,784,673	X X X	X X X	5,784,673	0.0093	53,797	0.0230	133,047	0.0340	196,679
5.	4	Low Quality		X X X	X X X		0.0213		0.0530		0.0750	
6.	5	Lower Quality	643,382	X X X	X X X	643,382	0.0432	27,794	0.1100	70,772	0.1700	109,375
7.	6	In or Near Default		X X X	X X X		0.0000		0.2000		0.2000	
8.		TOTAL Unrated Multi-class Securities Acquired by Conversion		X X X	X X X		X X X		X X X		X X X	
9.		TOTAL Bonds (sum of Lines 1 through 8) (Page 2, Line 1, Net Admitted Asset)	99,761,150	X X X	X X X	99,761,150	X X X	137,829	X X X	415,643	X X X	613,572
PREFERRED STOCKS												
10.	1	Highest Quality		X X X	X X X		0.0004		0.0023		0.0030	
11.	2	High Quality		X X X	X X X		0.0019		0.0058		0.0090	
12.	3	Medium Quality		X X X	X X X		0.0093		0.0230		0.0340	
13.	4	Low Quality		X X X	X X X		0.0213		0.0530		0.0750	
14.	5	Lower Quality		X X X	X X X		0.0432		0.1100		0.1700	
15.	6	In or Near Default		X X X	X X X		0.0000		0.2000		0.2000	
16.		Affiliated Life with AVR		X X X	X X X		0.0000		0.0000		0.0000	
17.		TOTAL Preferred Stocks (sum of Lines 10 through 16) (Page 2, Line 2.1, Net Admitted Asset)		X X X	X X X		X X X		X X X		X X X	
SHORT-TERM BONDS												
18.		Exempt Obligations	10,117,680	X X X	X X X	10,117,680	0.0000		0.0000		0.0000	
19.	1	Highest Quality		X X X	X X X		0.0004		0.0023		0.0030	
20.	2	High Quality		X X X	X X X		0.0019		0.0058		0.0090	
21.	3	Medium Quality		X X X	X X X		0.0093		0.0230		0.0340	
22.	4	Low Quality		X X X	X X X		0.0213		0.0530		0.0750	
23.	5	Lower Quality		X X X	X X X		0.0432		0.1100		0.1700	
24.	6	In or Near Default		X X X	X X X		0.0000		0.2000		0.2000	
25.		TOTAL Short-term Bonds (sum of Lines 18 through 24)	10,117,680	X X X	X X X	10,117,680	X X X		X X X		X X X	

ASSET VALUATION RESERVE (Continued)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
DEFAULT COMPONENT

Line Number	NAIC Desig- nation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Columns 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5	6	7	8	9	10
							Factor	Amount (Columns 4 x 5)	Factor	Amount (Columns 4 x 7)	Factor	Amount (Columns 4 x 9)
DERIVATIVE INSTRUMENTS												
26.		Exchange Traded		X X X	X X X		0.0004		0.0023		0.0030	
27.	1	Highest Quality		X X X	X X X		0.0004		0.0023		0.0030	
28.	2	High Quality		X X X	X X X		0.0019		0.0058		0.0090	
29.	3	Medium Quality		X X X	X X X		0.0093		0.0230		0.0340	
30.	4	Low Quality		X X X	X X X		0.0213		0.0530		0.0750	
31.	5	Lower Quality		X X X	X X X		0.0432		0.1100		0.1700	
32.	6	In or Near Default		X X X	X X X		0.0000		0.2000		0.2000	
33.		TOTAL Derivative Instruments		X X X	X X X		X X X		X X X		X X X	
34.		TOTAL (Lines 9 + 17 + 25 + 33)	109,878,830	X X X	X X X	109,878,830	X X X	137,829	X X X	415,643	X X X	613,572
MORTGAGE LOANS												
In Good Standing:												
35.		Farm Mortgages			X X X		0.0063 (a)		0.0120 (a)		0.0190 (a)	
36.		Residential Mortgages - Insured or Guaranteed	115,834		X X X	115,834	0.0003	35	0.0006	70	0.0010	116
37.		Residential Mortgages - All Other	1,034,953		X X X	1,034,953	0.0013	1,345	0.0030	3,105	0.0040	4,140
38.		Commercial Mortgages - Insured or Guaranteed			X X X		0.0003		0.0006		0.0010	
39.		Commercial Mortgages - All Other	11,094,910		X X X	11,094,910	0.0063 (a)	69,898	0.0120 (a)	133,139	0.0190 (a)	210,803
40.		In Good Standing With Restructured Terms			X X X		0.2800 (b)		0.6200 (b)		1.0000 (b)	
Overdue, Not in Process:												
41.		Farm Mortgages			X X X		0.0420		0.0760		0.1200	
42.		Residential Mortgages - Insured or Guaranteed			X X X		0.0005		0.0012		0.0020	
43.		Residential Mortgages - All Other	2,658		X X X	2,658	0.0025	7	0.0058	15	0.0090	24
44.		Commercial Mortgages - Insured or Guaranteed			X X X		0.0005		0.0012		0.0020	
45.		Commercial Mortgages - All Other	815,368		X X X	815,368	0.0420	34,245	0.0760	61,968	0.1200	97,844
In Process of Foreclosure:												
46.		Farm Mortgages			X X X		0.0000		0.1700		0.1700	
47.		Residential Mortgages - Insured or Guaranteed			X X X		0.0000		0.0040		0.0040	
48.		Residential Mortgages - All Other			X X X		0.0000		0.0130		0.0130	
49.		Commercial Mortgages - Insured or Guaranteed			X X X		0.0000		0.0040		0.0040	
50.		Commercial Mortgages - All Other			X X X		0.0000		0.1700		0.1700	
51.		TOTAL Schedule B Mortgages (sum of Lines 35 through 50) .. (Page 2, Line 3, Net Admitted Asset)	13,063,723		X X X	13,063,723	X X X	105,530	X X X	198,297	X X X	312,927
52.		Schedule DA Mortgages			X X X		(c)		(c)		(c)	
53.		TOTAL Mortgage Loans on Real Estate (Lines 51 + 52)	13,063,723		X X X	13,063,723	X X X	105,530	X X X	198,297	X X X	312,927

(a) Times the company's experience adjustment factor (EAF).
(b) Column 9 is the greater of 6.4% without any EAF adjustments or a company's EAF adjusted In Good Standing (IGS) factor plus 150 basis points. Columns 5 and 7 are 28% and 62% respectively of Column 9.
(c) Determined using the same factors and breakdowns used for directly owned mortgage loans.

ASSET VALUATION RESERVE
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
EQUITY AND OTHER INVESTED ASSET COMPONENT

Line Number	NAIC Desig-nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Columns 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Columns 4 x 5)	Factor	Amount (Columns 4 x 7)	Factor	Amount (Columns 4 x 9)
COMMON STOCK												
1.		Unaffiliated Public	329,700	X X X	X X X	329,700	0.0000		0.1300 ..(d)	42,861	0.1300 ..(d)	42,861
2.		Unaffiliated Private		X X X	X X X		0.0000		0.1600		0.1600	
3.		Federal Home Loan Bank		X X X	X X X				0.0050		0.0080	
4.		Affiliated Life with AVR		X X X	X X X		0.0000		0.0000		0.0000	
Affiliated Investment Subsidiary:												
5.		Fixed Income Exempt Obligations					X X X		X X X		X X X	
6.		Fixed Income Highest Quality					X X X		X X X		X X X	
7.		Fixed Income High Quality					X X X		X X X		X X X	
8.		Fixed Income Medium Quality					X X X		X X X		X X X	
9.		Fixed Income Low Quality					X X X		X X X		X X X	
10.		Fixed Income Lower Quality					X X X		X X X		X X X	
11.		Fixed Income In/Near Default					X X X		X X X		X X X	
12.		Unaffiliated Common Stock Public					0.0000		0.1300 ..(d)		0.1300 ..(d)	
13.		Unaffiliated Common Stock Private					0.0000		0.1600		0.1600	
14.		Mortgage Loans					(c)		(c)		(c)	
15.		Real Estate					(e)		(e)		(e)	
16.		Affiliated-Certain Other (See SVO Purposes and Procedures Manual)	71,835	X X X	X X X	71,835	0.0000		0.1300	9,339	0.1300	9,339
17.		Affiliated-All Other		X X X	X X X		0.0000		0.1600		0.1600	
18.		TOTAL Common Stock (sum of Lines 1 through 17) (Page 2, Line 2.2, Net Admitted Asset)	401,535			401,535	X X X		X X X	52,200	X X X	52,200
REAL ESTATE												
19.		Home Office Property (General Account Only)					0.0000		0.0750		0.0750	
20.		Investment Properties	18,840			18,840	0.0000		0.0750	1,413	0.0750	1,413
21.		Properties Acquired in Satisfaction of Debt	27,598			27,598	0.0000		0.1100	3,036	0.1100	3,036
22.		TOTAL Real Estate (sum of Lines 19 through 21)	46,438			46,438	X X X		X X X	4,449	X X X	4,449
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
23.		Exempt Obligations		X X X	X X X		0.0000		0.0000		0.0000	
24.	1	Highest Quality		X X X	X X X		0.0004		0.0023		0.0030	
25.	2	High Quality		X X X	X X X		0.0019		0.0058		0.0090	
26.	3	Medium Quality		X X X	X X X		0.0093		0.0230		0.0340	
27.	4	Low Quality		X X X	X X X		0.0213		0.0530		0.0750	
28.	5	Lower Quality		X X X	X X X		0.0432		0.1100		0.1700	
29.	6	In or Near Default		X X X	X X X				0.2000		0.2000	
30.		TOTAL with Bond characteristics (sum of Lines 23 through 29)		X X X	X X X		X X X		X X X		X X X	

33 Asset Valuation Reserve - Equity Component - #2 NONE

34 Asset Valuation Reserve - Equity Component - #3 NONE

35 Asset Valuation Reserve - Replications NONE

36 Schedule F NONE

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

37

		Total		Group Accident and Health		Credit Accident & Health (Group and Individual)		Collectively Renewable		Other Individual Contracts									
										Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
		1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																			
1.	Premiums written	1,232,363	X X X	891,901	X X X		X X X		X X X	2,761	X X X	59,423	X X X		X X X		X X X	278,278	X X X
2.	Premiums earned	1,232,362	X X X	891,900	X X X		X X X		X X X	2,761	X X X	59,423	X X X		X X X		X X X	278,278	X X X
3.	Incurred claims	975,615	79.2	477,986	53.6					11,622	420.9	51,503	86.7					434,504	156.1
4.	Cost containment expenses																		
5.	Incurred claims and cost containment expenses (Lines 3 and 4)	975,615	79.2	477,986	53.6					11,622	420.9	51,503	86.7					434,504	156.1
6.	Increase in contract reserves	(762)	(0.1)							(1)	0.0	(2,068)	(3.5)					1,307	0.5
7.	Commissions (a)	(264,971)	(21.5)	(279,875)	(31.4)					137	5.0	3,460	5.8					11,307	4.1
8.	Other general insurance expenses	2,020,762	164.0	1,633,577	183.2					2,991	108.3	47,176	79.4					337,018	121.1
9.	Taxes, licenses and fees	169,324	13.7	130,117	14.6					221	8.0	4,234	7.1					34,752	12.5
10.	Total other expenses incurred	1,925,115	156.2	1,483,819	166.4					3,349	121.3	54,870	92.3					383,077	137.7
11.	Aggregate write-ins for deductions																		
12.	Gain from underwriting before dividends or refunds ...	(1,667,606)	(135.3)	(1,069,905)	(120.0)					(12,209)	(442.2)	(44,882)	(75.5)					(540,610)	(194.3)
13.	Dividends or refunds																		
14.	Gain from underwriting after dividends or refunds	(1,667,606)	(135.3)	(1,069,905)	(120.0)					(12,209)	(442.2)	(44,882)	(75.5)					(540,610)	(194.3)
DETAILS OF WRITE-INS																			
1101.	CASH OVER & SHORT																		
1102.	GAINS ON SALE																		
1103.	MISC INCOME ADMINISTRATIVE SERVICE CHARGE																		
1198.	Summary of remaining write-ins for Line 11 from overflow page																		
1199.	TOTALS (Lines 1101 through 1103 plus 1198) (Line 11 above)																		

(a) Includes \$.0 reported as "Contract, membership and other fees retained by agents."

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

	1	2	3	4	Other Individual Contracts				
					5	6	7	8	9
	Total	Group Accident and Health	Credit Accident and Health (Group and Individual)	Collectively Renewable	Non-Cancelable	Guaranteed Renewable	Non-Renewable for Stated Reasons Only	Other Accident Only	All Other
PART 2 - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums	14,979				170	2,804			12,005
2. Advance premiums	11,208				51	893			10,264
3. Reserve for rate credits	235,023	235,023							
4. Total premium reserves, current year	261,210	235,023			221	3,697			22,269
5. Total premium reserves, prior year	264,219	235,023			347	4,768			24,081
6. Increase in total premium reserves	(3,009)				(126)	(1,071)			(1,812)
B. Contract Reserves:									
1. Additional reserves (a)	85,177				9,762	74,108			1,307
2. Reserve for future contingent benefits (deferred maternity and other similar benefits)									
3. Total contract reserves, current year	85,177				9,762	74,108			1,307
4. Total contract reserves, prior year	85,939				9,763	76,176			
5. Increase in contract reserves	(762)				(1)	(2,068)			1,307
C. Claim Reserves and Liabilities:									
1. Total current year	412,771	163,584			68	28,624			220,495
2. Total prior year	228,246	125,158			1,725	5,232			96,131
3. Increase	184,525	38,426			(1,657)	23,392			124,364
PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES									
1. Claim Paid During the Year:									
1.1 On claims incurred prior to current year	311,793	174,645			4,802	18,756			113,590
1.2 On claims incurred during current year	479,297	264,915			8,477	9,355			196,550
2. Claim Reserves and Liabilities, December 31, Current Year:									
2.1 On claims incurred prior to current year	110,669	4,695				9,935			96,039
2.2 On claims incurred during current year	302,102	158,889			68	18,689			124,456
3. Test:									
3.1 Lines 1.1 and 2.1	422,462	179,340			4,802	28,691			209,629
3.2 Claim reserves and liabilities, December 31, prior year	228,246	125,158			1,725	5,232			96,131
3.3 Line 3.1 minus Line 3.2	194,216	54,182			3,077	23,459			113,498
PART 4 - REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written	353,753	352,998							755
2. Premiums earned	353,753	352,998							755
3. Incurred claims	(92)	(92)							
4. Commissions	141,108	141,108							
B. Reinsurance Ceded:									
1. Premiums written	2,519,623	2,519,623							
2. Premiums earned	2,519,623	2,519,623							
3. Incurred claims	2,282,226	2,282,226							
4. Commissions	528,449	528,449							

(a) Includes \$.....0 premium deficiency reserve.

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1	2	3	4
	Medical	Dental	Other	Total
A. Direct:				
1. Incurred Claims	2,225,839	523,879	508,216	3,257,934
2. Beginning Claim Reserves and Liabilities	1,720,781		103,088	1,823,869
3. Ending Claim Reserves and Liabilities	1,631,806	120,000	259,774	2,011,580
4. Claims Paid	2,314,814	403,879	351,530	3,070,223
B. Assumed Reinsurance:				
5. Incurred Claims	(92)			(92)
6. Beginning Claim Reserves and Liabilities	339,942			339,942
7. Ending Claim Reserves and Liabilities	339,942			339,942
8. Claims Paid	(92)			(92)
C. Ceded Reinsurance:				
9. Incurred Claims	2,282,226			2,282,226
10. Beginning Claim Reserves and Liabilities	3,184,874			3,184,874
11. Ending Claim Reserves and Liabilities	2,846,794			2,846,794
12. Claims Paid	2,620,306			2,620,306
D. Net:				
13. Incurred Claims	(56,479)	523,879	508,216	975,616
14. Beginning Claim Reserves and Liabilities	(1,124,151)		103,088	(1,021,063)
15. Ending Claim Reserves and Liabilities	(875,046)	120,000	259,774	(495,272)
16. Claims Paid	(305,584)	403,879	351,530	449,825
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred Claims and Cost Containment Expenses ..	431,634	525,491	18,490	975,615
18. Beginning Reserves and Liabilities	(1,124,151)		103,088	(1,021,063)
19. Ending Reserves and Liabilities	(875,047)	120,000	259,774	(495,273)
20. Paid Claims and Cost Containment Expenses	182,530	405,491	(138,196)	449,825

SCHEDULE S - PART 1 - SECTION 1

Reinsurance Assumed Life Insurance, Annuities, Deposit Funds and Other Liabilities

Without Life or Disability Contingencies, and Related Benefits Listed by Reinsured Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	11	12
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsured	Location	Type of Reinsurance Assumed	Amount of In force at End of Year	Reserve	Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Non-affiliates											
60054	06-6033492	05/09/1969	AETNA LIFE & CASUALTY	HARTFORD, CT	YRT/G	563,492,500		602,477	173,361		
65978	13-5581829	12/01/1969	METROPOLITAN LIFE	NEW YORK, NY	YRT/G	275,443,246		604,395	206,643		
65978	13-5581829	12/01/1969	METROPOLITAN LIFE INS CO	NEW YORK, NY	YRT/G	2,216,667,430		7,671,377			
68241	22-1211670	08/01/1972	PRUDENTIAL INS CO OF AMER	NEWARK, NJ	YRT/G	1,911,657,698		122,631			
66168	41-0417830	09/01/1985	MINNESOTA MUTUAL LIFE	ST PAUL, MN	YRT/G	4,397,793,675		7,679,601	3,841,024		
80314	52-0913817	04/01/1972	UNICARE	CHARLESTOWN, MA	YRT/G	58,909,000		28,440	27,603		
81973	75-1296086	09/01/2004	COVENTRY HLTH & LIFE INS CO	IL	CO/I	5,505,681	2,351,177	39,361	96,504		
67580	76-0100829	10/01/2005	NORTH AMERICAN LIFE INS CO OF TX	AUSTIN, TX	CO/I	32,670,928	3,371,005	319,253	118,809		
61468	63-0220465	01/01/2008	BOOKER T WASHINGTON INS CO INC	AL	YRT/I	131,020,223	25,736,864	2,924,994	440,192		
70157	62-0392810	01/01/2008	UNIVERSAL LIFE INS CO	AL	YRT/I	35,794,887	7,031,343	1,706,485	125,168		
0299999 Subtotal - General Account - Non-affiliates						9,628,955,268	38,490,389	21,699,014	5,029,304		
0399999 Total - General Account						9,628,955,268	38,490,389	21,699,014	5,029,304		
0799999 Totals						9,628,955,268	38,490,389	21,699,014	5,029,304		

SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	11	12
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsured	Location	Type of Reinsurance Assumed	Premiums	Unearned Premiums	Reserve Liability Other Than for Unearned Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
Non-Affiliates											
53228	04-1045815	05/01/2003	BCBS OF MA	BOSTON, MA	OTH/G	85,725		57,150			
54291	38-2069753	05/01/2003	BCBS OF MI	DETROIT, MI	OTH/G	100,853		67,235			
53473	05-0158952	05/01/2003	BCBS OF RI	PROVIDENCE, RI	OTH/G	113,157		75,438			
53686	81-0216685	05/01/2003	BCBS OF MT	HELENA, MT	OTH/G	52,800		35,200			
70122	73-0493220	01/01/2005	UNIVERSAL FIDELITY LIFE INS CO	OK	OTH/G	463					
81973	75-1296086	09/01/2004	COVENTRY HLTH & LIFE INS CO	IL	CO/I	755					
0299999 Total - Non-Affiliates						353,753		235,023			
0399999 Totals						353,753		235,023			

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by
Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Location	6 Paid Losses	7 Unpaid Losses
Life and Annuity, Non-Affiliates						
00000	AA-3190829	09/30/2003	MAX RE LTD	HAMILTON HM11, BERMUDA	263,841	1,738,479
62308	06-0303370	01/01/1972	CONNECTICUT GENERAL	HARTFORD, CT		
66133	41-1760577	01/01/2007	WILTON REASSURANCE COMPANY	MINNEAPOLIS, MINNESOTA	147,234	239,054
88099	75-1608507	07/01/2002	OPTIMUM RE INS CO	DALLS, TEXAS		42,968
82627	06-0839705	11/01/1960	SWISS RE LIFE & HEALTH AMER INC	STAMFORD, CT	85,450	186,946
00000	AA-3194190	09/30/2005	QUANTA REINS LTD	HAMILTON, HM11, BERMUDA		
62308	06-0303370	01/01/1972	CONNECTICUT GEN LIFE INS CO	HARFORD, CT		46,609
00000	AA-3190702	05/01/2003	SENSU LTD	HAMILTON, HM12, BERMUDA		3,229,930
00000	AA-1561031	01/01/2008	LONDON LIFE INS CO	BLUE BELL, PA		508,824
0299999 Total - Life and Annuity, Non-Affiliates					496,525	5,992,810
0399999 Totals - Life and Annuity					496,525	5,992,810
Accident and Health, Non-Affiliates						
10227	13-4924125	09/30/2005	MUNICH REINS AMER INC	DE	816,630	163,590
11985	20-0735099	01/01/2008	COMPANION CAPTIVE INS CO	SC		
19453	13-5616275	01/01/2005	TRANSATLANTIC REINS CO	NEW YORK, NY		
10357	52-1952955	01/01/2003	PLATINUM UNDERWRITERS REINS INC	MD		
97055	59-2213662	10/01/2004	MEGA LIFE & HLTH INS CO THE	OKLAHOMA		24,703
00000	AA-3161010	01/01/2009	LONDON LIFE INTL REINS CORP	BARBADOS	91,414	
00000	AA-3190702	05/01/2003	SENSU LTD	HAMILTON, HM12, BERMUDA		10,000
0599999 Total - Accident and Health, Non-Affiliates					908,044	198,293
0699999 Totals - Accident and Health					908,044	198,293
0799999 Totals - Life, Annuity and Accident and Health					1,404,569	6,191,103

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities Without Life or Disability
Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Location	6 Type of Reinsurance Ceded	7 Amount in Force at End of Year	Reserve Credit Taken		10 Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
							8 Current Year	9 Prior Year		11 Current Year	12 Prior Year		
Authorized General Account - Non-Affiliates													
68276	48-1024691	03/01/1989	EMPLOYERS REASSUR CORP	OVERLAND PARK, KS	CO/I	100,000	389	389					
68276	48-1024691	03/01/1989	EMPLOYERS REASSUR CORP	OVERLAND PARK, KS	YRT/I	368,204	3,010	2,801	4,000				
68276	48-1024691	01/01/1983	EMPLOYERS REASSUR CORP	OVERLAND PARK, KS	YRT/I	2,025,271	12,456	11,761	25,954				
65978	13-5581829	12/01/1969	METROPOLITAN LIFE INS CO	NEW YORK, NY	YRT/I	17,568,000			25,523				
88099	75-1608507	04/08/1946	OPTIMUM RE INS CO	DALLAS, TX	YRT/I	11,453	293	346	(781)				
88099	75-1608507	04/08/1946	OPTIMUM RE INS CO	DALLAS, TX	CO/I		13	26					
88099	75-1608507	12/01/1948	OPTIMUM RE INS CO	DALLAS, TX	CO/I		9	30	7,558				
88099	75-1608507	02/23/1965	OPTIMUM RE INS CO	DALLAS, TX	YRT/I	125,817	5,978	7,041	(2)				
88099	75-1608507	02/23/1965	OPTIMUM RE INS CO	DALLAS, TX	CO/I								
88099	75-1608507	04/07/1967	OPTIMUM RE INS CO	DALLAS, TX	YRT/I	467,275	33,772	3,236	6,577				
88099	75-1608507	04/07/1967	OPTIMUM RE INS CO	DALLAS, TX	CO/I		252	356					
88099	75-1608507	09/01/1996	OPTIMUM RE INS CO	DALLAS, TX	YRT/I	121,035	414	480	1,238				
88099	75-1608507	07/01/2005	OPTIMUM RE INS CO	DALLAS, TX	YRT/I	10,590,199	15,812	15,346	15,543				
88099	75-1608507	07/01/2002	OPTIMUM RE INS CO	DALLAS, TX	YRT/G	11,110,635			17,200				
68241	22-1211670	08/01/1972	PRUDENTIAL INS CO OF AMER	NEWARK, NJ	YRT/I				673				
82627	06-0839705	11/01/1960	SWISS RE LIFE & HEALTH AMER INC	STAMFORD, CT	YRT/I	150,760	2,092	2,092	516				
82627	06-0839705	05/01/1989	SWISS RE LIFE & HEALTH AMER INC	STAMFORD, CT	YRT/I	9,241	264	264	35				
67148	56-0343440	01/01/1972	OCCIDENTAL LIFE INS CO OF NC	LOS ANGELES, CA	CO/I	50,000	303	275					
67148	56-0343440	01/01/1972	OCCIDENTAL LIFE INS CO OF NC	LOS ANGELES, CA	YRT/I	73,224	3,170	2,956	562				
80837	31-0472910	02/01/1987	UNION CENTRAL LIFE INS CO	CINCINNATI, OH	YRT/I	2,107,888	128,516	7,945	33,599				
70815	06-0838648	01/01/2004	HARTFORD LIFE & ACCIDENT INS CO	HARTFORD,CT	CO/G		43,629	43,804	39,300				
66168	41-0417830	01/01/2005	MINNESOTA LIFE INS CO	ST. PAUL,MN	CO/G				1,457,215				
82627	06-0839705	09/01/2004	SWISS RE LIFE & HEALTH AMER INC	STAMFORD, CT	YRT/I								
88099	75-1608507	01/01/2004	OPTIMUM RE INS CO	DALLAS, TX	YRT/G	22,604,351	143,413		59,396				
66133	41-1760577	01/01/2007	WILTON REASSURANCE COMPANY	MINNEAPOLIS, MINNESOTA	CO/I	80,343,859	1,139,471	591,216	2,922,865				
76694	23-2044256	01/01/2008	LONDON LIFE REINS CO	BLUE BELL, PA	MCO/I	150,133,599	4,020,000	6,317,124	1,766,475	4,020,000	5,360,000	25,309,413	
88099	75-1608507	01/01/2001	OPTIMUM RE INS CO	DALLAS, TX	ADB/G				25,710				
67580	76-0100829	01/01/2009	NORTH AMERICA LIFE	DALLAS, TX	CO/I		124,394		583,167				
82627	06-0839705	01/01/2009	SWISS RE	ARMONK, NY	YRT/G	34,746,501			519,579				
93742	41-1412669	04/01/2009	SECURIAN LIFE	MINNEAPOLIS, MINNESOTA	CO/G	4,560,974,815			5,620,105				
0299999 Subtotal - Authorized General Account - Non-Affiliates						4,893,682,127	5,677,650	7,007,487	13,132,009	4,020,000	5,360,000	25,309,413	
0399999 Total - Authorized General Account						4,893,682,127	5,677,650	7,007,487	13,132,009	4,020,000	5,360,000	25,309,413	
Unauthorized General Account - Non-Affiliates													
00000	AA-3190829	09/30/2003	MAX BERMUDA LTD	BERMUDA	OTH/I	72,448,893	35,865,861	37,030,766	699,013				
00000	AA-3194190	09/30/2005	QUANTA REINS LTD	BERMUDA	CO/G	17,465,333	2,435,164	721,427	962,203	422,378	600,581	1,939,844	
00000	AA-1370006	01/01/2009	INTL REINS CO S A	GRAND CAYMAN	CO/G				527,649				
0599999 Subtotal - Unauthorized General Account - Non-Affiliates						89,914,226	38,301,025	37,752,193	2,188,865	422,378	600,581	1,939,844	
0699999 Total - Unauthorized General Account						89,914,226	38,301,025	37,752,193	2,188,865	422,378	600,581	1,939,844	
0799999 Total - Authorized and Unauthorized General Account						4,983,596,353	43,978,675	44,759,680	15,320,874	4,442,378	5,960,581	27,249,256	
1599999 Totals						4,983,596,353	43,978,675	44,759,680	15,320,874	4,442,378	5,960,581	27,249,256	

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	Outstanding Surplus Relief		12	13
									10	11		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Location	Type	Premiums	Unearned Premiums (estimated)	Reserve Credit Taken Other than for Unearned Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
Authorized General Account - Non-Affiliates												
10357	52-1952955	05/01/2002	PLATINUM UNDERWRITERS REINS INC	MD	CO/G	(15)						
19453	13-5616275	01/01/2005	TRANSATLANTIC REIN CO	NEW YORK, NY	CO/G	(3)						
10227	13-4924125	10/01/2005	MUNICH REINS AMER INC	DE	CO/G	1,091,500						
38776	13-2997499	10/01/2004	WHITE MOUNTAINS REINS CO OF AMER	CT	CO/G	164,828						
42374	74-2195939	01/01/2009	HOUSTON CAS CO	TX	CO/G	31,349						
0299999 Subtotal - Authorized General Account - Non-Affiliates						1,287,659						
0399999 Total - Authorized General Account						1,287,659						
Unauthorized General Account - Non-Affiliates												
00000	AA-0040031	01/01/2008	TRISTAR LTD	CAYMAN ISLANDS	OTH/G	187,656						
11985	20-0735099	01/01/2008	COMPANION CAPTIVE INS CO	SC	OTH/G	933,056						
00000	AA-3161010	01/01/2009	LONDON LIFE INTL REINS CORP	GRAND CAYMAN	CO/G	114,096						
0599999 Subtotal - Unauthorized General Account - Non-Affiliates						1,234,808						
0699999 Total - Unauthorized General Account						1,234,808						
0799999 Total - Authorized and Unauthorized General Account						2,522,467						
1599999 Totals						2,522,467						

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	10	11	12	13	14
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Totals (Cols. 5 + 6 + 7)	Letters of Credit	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9+10+11+12+13 But Not in Excess of Col. 8
General Account - Life and Annuity - Non-Affiliates													
00000	AA-3190829	09/30/2003	MAX RE LTD	35,865,861	1,738,479	54,395	37,658,735		44,516,295				37,658,735
00000	AA-3194190	09/30/2005	QUANTA REINS LTD	616,225	63,196	(264,718)	414,703	600,581					414,703
00000	AA-3161010	01/01/2009	LONDON LIFE INTL REINS CORP		16,359		16,359						
0299999 Subtotal - General Account - Life and Annuity - Non-Affiliates				36,482,086	1,818,034	(210,323)	38,089,797	600,581	44,516,295				38,073,438
0399999 Total - General Account - Life and Annuity				36,482,086	1,818,034	(210,323)	38,089,797	600,581	44,516,295				38,073,438
General Account - Accident & Health - Non-Affiliates													
00000	AA-3190702	05/01/2002	SENSU LTD										
95251	76-0196559	01/01/2004	NATIONAL PACIFIC DENTAL INC										
66753	38-1744924	04/01/2006	LIBERTY UNION LIFE ASSUR CO										
0599999 Subtotal - General Account - Accident & Health - Non-Affiliates													
0699999 Total - General Account - Accident and Health													
0799999 Total - General Account				36,482,086	1,818,034	(210,323)	38,089,797	600,581	44,516,295				38,073,438
1199999 Totals (General Account and Separate Accounts combined)				36,482,086	1,818,034	(210,323)	38,089,797	600,581	44,516,295				38,073,438

SCHEDULE S - PART 5

Five-Year Exhibit of Reinsurance Ceded Business
(000 Omitted)

	1 2009	2 2008	3 2007	4 2006	5 2005
A. OPERATIONS ITEMS:					
1. Premiums and annuity considerations for life and accident and health contracts	17,776	45,933	18,473	32,268	36,268
2. Commissions and reinsurance expense allowances	5,789	12,148	5,195	7,282	5,507
3. Contract claims	13,433	7,217	14,203	23,031	26,340
4. Surrender benefits and withdrawals for life contracts					
5. Dividends to policyholders					
6. Reserve adjustments on reinsurance ceded	(431)	23,706	302	549	363
7. Increase in aggregate reserves for life and accident and health contracts					220
B. BALANCE SHEETS ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	5,459	4,238	1,894	1,416	1,705
9. Aggregate reserves for life and accident and health contracts	43,979	44,831	39,853	40,693	42,877
10. Liability for deposit-type contracts					
11. Contract claims unpaid	6,191	3,077	3,351	4,045	6,253
12. Amounts recoverable on reinsurance	1,405	1,523	1,117	539	1,351
13. Experience rating refunds due or unpaid					
14. Policyholders' dividends (not included in Line 10)					
15. Commissions and reinsurance expense allowances unpaid					
16. Unauthorized reinsurance offset	16				
C. UNAUTHORIZED REINSURANCE					
(Deposits By and Funds Withheld From)					
17. Funds deposited by and withheld from (F)					1,383
18. Letters of credit (L)	601	1,000	1,750	1,750	1,750
19. Trust agreements (T)	44,516	43,785	45,464	44,094	46,121
20. Other (O)					

SCHEDULE S - PART 6

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1	2	3
	As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
ASSETS (Page 2, Column 3)			
1. Cash and invested assets (Line 10)	132,174,109		132,174,109
2. Reinsurance ceded (Line 14)	5,193,325	(5,193,325)	
3. Premiums and considerations (Line 13)	3,625,236	5,459,485	9,084,721
4. Net credit for ceded reinsurance	X X X	50,071,920	50,071,920
5. All other admitted assets (balance)	10,587,567		10,587,567
6. TOTAL assets excluding Separate Accounts (Line 24)	151,580,237	50,338,080	201,918,317
7. Separate Account assets (Line 25)			
8. TOTAL assets (Line 26)	151,580,237	50,338,080	201,918,317
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2)	126,707,691	43,978,676	170,686,367
10. Liability for deposit-type contracts (Line 3)	2,698,176		2,698,176
11. Claim reserves (Line 4)	4,040,631	6,167,153	10,207,784
12. Policyholder dividends/reserves (Lines 5 through 7)			
13. Premium & annuity considerations received in advance (Line 8)	221,248	192,251	413,499
14. Other contract liabilities (Line 9)	104,496		104,496
15. Reinsurance in unauthorized companies (Line 24.2)	16,359		16,359
16. Funds held under reinsurance with unauthorized reinsurers (Line 24.3)			
17. All other liabilities (balance)	11,426,330		11,426,330
18. TOTAL Liabilities excluding Separate Accounts (Line 26)	145,214,931	50,338,080	195,553,011
19. Separate Account liabilities (Line 27)			
20. TOTAL liabilities (Line 28)	145,214,931	50,338,080	195,553,011
21. Capital & surplus (Line 38)	6,365,306	X X X	6,365,306
22. TOTAL liabilities, capital and surplus (Line 39)	151,580,237	50,338,080	201,918,317
NET CREDIT FOR CEDED REINSURANCE			
23. Contract reserves	43,978,676		
24. Claim reserves	6,167,153		
25. Policyholder dividends/reserves			
26. Premium & annuity considerations received in advance	192,251		
27. Liability for deposit-type contracts			
28. Other contract liabilities			
29. Reinsurance ceded assets	5,193,325		
30. Other ceded reinsurance recoverables			
31. TOTAL ceded reinsurance recoverables	55,531,405		
32. Premiums and considerations	5,459,485		
33. Reinsurance in unauthorized companies			
34. Funds held under reinsurance treaties with unauthorized reinsurers			
35. Other ceded reinsurance payables/offsets			
36. TOTAL ceded reinsurance payable/offsets	5,459,485		
37. TOTAL net credit for ceded reinsurance	50,071,920		

SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

Direct Business only							
		1	2	3	4	5	6
		Life	Annuities	Disability	Long-Term		
		(Group and	(Group and	Income	Care		
		Individual)	Individual)	(Group and	(Group and	Deposit-Type	
	States, Etc.			Individual)	Individual)	Contracts	Totals
1.	Alabama (AL)	673,003		797			673,800
2.	Alaska (AK)						
3.	Arizona (AZ)	448					448
4.	Arkansas (AR)	231					231
5.	California (CA)	578,674		1,397,902			1,976,576
6.	Colorado (CO)						
7.	Connecticut (CT)	168					168
8.	Delaware (DE)	169					169
9.	District of Columbia (DC)	488,071	7,238	13,901			509,210
10.	Florida (FL)	354,610		298			354,908
11.	Georgia (GA)	1,813,840	24,042	724,256			2,562,138
12.	Hawaii (HI)						
13.	Idaho (ID)	27					27
14.	Illinois (IL)	3,078,265	700	1,946			3,080,911
15.	Indiana (IN)	18,742		228,268			247,010
16.	Iowa (IA)	110					110
17.	Kansas (KS)	301					301
18.	Kentucky (KY)	56,572		546			57,118
19.	Louisiana (LA)	137,757		67,864			205,621
20.	Maine (ME)						
21.	Maryland (MD)	1,036,048	18,186	5,072			1,059,306
22.	Massachusetts (MA)	458					458
23.	Michigan (MI)	896,411	10,695	6,623			913,729
24.	Minnesota (MN)	(199)					(199)
25.	Mississippi (MS)	469,162					469,162
26.	Missouri (MO)	1,475		15			1,490
27.	Montana (MT)						
28.	Nebraska (NE)						
29.	Nevada (NV)	79					79
30.	New Hampshire (NH)	118					118
31.	New Jersey (NJ)	494,128	2,326	2,871			499,325
32.	New Mexico (NM)						
33.	New York (NY)	7,053		178			7,231
34.	North Carolina (NC)	4,375,694	167,434	955,915			5,499,043
35.	North Dakota (ND)						
36.	Ohio (OH)	27,754		164			27,918
37.	Oklahoma (OK)	178					178
38.	Oregon (OR)	19					19
39.	Pennsylvania (PA)	1,183,589	3,380	6,341			1,193,310
40.	Rhode Island (RI)						
41.	South Carolina (SC)	792,542	4,820	46,737			844,099
42.	South Dakota (SD)						
43.	Tennessee (TN)	581,390	11,706	45,536			638,632
44.	Texas (TX)	106,507		(40)			106,467
45.	Utah (UT)						
46.	Vermont (VT)						
47.	Virginia (VA)	924,141	10,198	50,658			984,997
48.	Washington (WA)	517					517
49.	West Virginia (WV)						
50.	Wisconsin (WI)	38					38
51.	Wyoming (WY)						
52.	American Samoa (AS)						
53.	Guam (GU)						
54.	Puerto Rico (PR)						
55.	U.S. Virgin Islands (VI)						
56.	Northern Mariana Islands (MP)						
57.	Canada (CN)						
58.	Aggregate other alien (OT)						
59.	TOTALS	18,098,090	260,725	3,555,848			21,914,663

SCHEDULE Y (Continued)
PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/(Disburse- ments) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
					N O N E							
9999999 Totals	X X X	.....	.....	.....

Schedule Y Part 2 Explanation:

SUPPLEMENTAL EXHIBITS AND SCHEDULES
INTERROGATORIES

Response

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	Yes
2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	Yes
3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	Yes
4. Will an Actuarial opinion be filed by March 1?	Yes
APRIL FILING	
5. Will Management's Discussion and Analysis be filed by April 1?	Yes
6. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	Yes
7. Will the Adjustment Form (if required) be filed with the state of domicile and the NAIC by April 1?	Yes
8. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	Yes
JUNE FILING	
9. Will an audited financial report be filed by June 1?	Yes
10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	Yes

The following supplemental reports are required to be filed as part of your annual statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but it is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING	
11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	No
12. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	No
13. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	No
14. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed by March 1?	Yes
15. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory #3 to Exhibit 5 be filed by March 1?	Yes
16. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	No
17. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	No
18. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	No
19. Will the reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	No
20. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	No
21. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	No
22. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	No
23. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	No
24. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	No
25. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	No
26. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	No
27. Will the Workers' Compensation Carve-Out Supplement be filed by March 1?	No
28. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	Yes
29. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	No
APRIL FILING	
30. Will the Long-Term Care Experience Reporting Forms be file with the state of domicile and the NAIC by April 1?	No
31. Will the Interest Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?	Yes
32. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	No
33. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	Yes

Explanations:

Bar Codes:

Schedule SIS



Medicare Supplement Insurance Experience Exhibit



Trusteed Surplus Statement



Actuarial Opinion on X-Factors



Separate Accounts Funding Guaranteed Minimum Benefits Actuarial Opinion



Synthetic Guaranteed Investment Contracts Actuarial Opinion



SUPPLEMENTAL EXHIBITS AND SCHEDULES
INTERROGATORIES (continued)

Reasonableness 1 - Assumptions



67032200944500000 2009 Document Code: 445

Reasonableness 2 - Consistency



67032200944600000 2009 Document Code: 446

Reasonableness 3 - Implied Guarantee



67032200944700000 2009 Document Code: 447

Reasonableness 4 - Ave. Market Value



67032200944800000 2009 Document Code: 448

Reasonableness 5 - Market Value



67032200944900000 2009 Document Code: 449

C-3 RBC Certifications required under C-3 Phase I



67032200945000000 2009 Document Code: 450

C-3 RBC Certifications required under C-3 Phase II



67032200945100000 2009 Document Code: 451

Actuarial Certifications related to Annuity Nonforeiture Ongoing Compliance



67032200945200000 2009 Document Code: 452

Worker's Compensation Carve-out Supplement



67032200949500000 2009 Document Code: 495

Medicare Part D Coverage Supplement



67032200936500000 2009 Document Code: 365

LTC Supplemental Interrogatories



67032200930600000 2009 Document Code: 306

Credit Insurance Exhibit



67032200923000000 2009 Document Code: 230

ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols.1-2)	Net Admitted Assets
2304. A/R SE DURHAM DEVELOPMENT CORP	91,063	91,063		
2305. OTHER AMOUNTS RECEIVABLE	230,554	104,254	126,300	103,269
2306. PERSONAL LOANS TO EMPLOYEES	712	712		
2307. NON QUALIFIED PENSION BENEFIT ASSETS	686,780	686,780		0
2308. LEASEHOLD IMPROVEMENTS	172,421	172,421		
2397. Summary of remaining write-ins for Line 23 (Lines 2304 through 2396)	1,181,529	1,055,229	126,300	103,269

SUMMARY OF OPERATIONS

	1	2
	Current Year	Prior Year
08.304. INC (DEC) ON FUNDS HELD ASSET	(745,976)	(22,352)
08.305. CASH OVER / SHORT	873	1,459
08.306. DEPOSIT ACCOUNTING INCOME	104,300	(54,828)
08.307. GAIN / LOSS ON SALE OF EQUIPMENT		
08.397. Summary of remaining write-ins for Line 8.3 (Lines 08.304 through 08.396)	(640,803)	(75,721)
2704. LEGAL SETTLEMENT		2,145
2705.		
2797. Summary of remaining write-ins for Line 27 (Lines 2704 through 2796)		2,145

OVERFLOW PAGE FOR WRITE-INS

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health			12 Aggregate of All Other Lines of Business
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (a)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other	
08.304. INC/DEC ON FUNDS HELD ASSET	(745,976)						(745,976)					
08.305. CASH OVER / SHORT												
08.306. DEPOSIT ACCOUNTING INCOME	104,300						104,300					
08.307.												
08.397. Summary of remaining write-ins for Line 8.3 (Lines 08.304 through 08.396)	(641,676)						(641,676)					
2704.												
2797. Summary of remaining write-ins for Line 27 (Lines 2704 through 2796)												

EXHIBIT OF NONADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
2304. OTHER AMOUNTS RECEIVABLE	104,254	17,978	(86,276)
2305. PERSONAL LOANS TO EMPLOYEES	712	1,604	892
2306. NON QUALIFIED PENSION BENEFIT ASSETS	686,780	488,532	(198,248)
2307. LEASEHOLD IMPROVEMENTS	172,421		(172,421)
2308. NEGATIVE IMR NON-ADMITTED		519,032	519,032
2309. OTHER NON-ADMITTED ASSETS		59,724	59,724
2310. NOTES RECEIVABLE - EDH		3,115	3,115
2397. Summary of remaining write-ins for Line 23 (Lines 2304 through 2396)	964,167	1,089,985	125,818

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

		Total		Group Accident and Health		Credit Accident & Health (Group and Individual)		Collectively Renewable		Other Individual Contracts								
										Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other
		1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																		
1104.	MISCELLANEOUS INCOME .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
1105.	DEFERRED COMP .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
1106.	QUALIFIED PENSION BENEFIT COST .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
1107.	OTHER DEDUCTIONS .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
1108.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
1197.	Summary of remaining write-ins for Line 11 (Lines 1104 through 1196) .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT
For The Year Ended December 31, 2009
(To be filed by March 1)
FOR THE STATE OF CALIFORNIA



NAIC Group Code: 0000 NAIC Company Code: 67032
Address (City, State and Zip Code): Durham, NC 27701-3616
Person Completing This Exhibit:

Title:				Telephone:													
1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2006				Policies Issued in 2007, 2008, 2009			
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	11 Premiums Earned	Incurred Claims		14 Number of Covered Lives	15 Premiums Earned	Incurred Claims		18 Number of Covered Lives
											12	13			16	17	
											Amount				Amount		
0199999 Total Experience on Individual Policies
0299999 Total Experience on Group Policies

GENERAL INTERROGATORIES

- 1. If response in Column 1 is no, give full and complete details:
- 2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.
 - 2.1 Address:
 - 2.2 Contact Person and Phone Number:
- 3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B)
 - 3.1 Address:
 - 3.2 Contact Person and Phone Number:
- 4. Explain any policies identified above as policy type "O":

Supp16 California

Supp21	Workers Comp. Carve-Out Supp. Pt 1 Prem Earned	NONE
Supp21	Workers Comp. Carve-Out Supp. Pt 2 Prem Written	NONE
Supp21	Workers Comp. Carve-Out Supp. Pt 3 Losses Paid	NONE
Supp21	Workers Comp. Carve-Out Supp. Pt 4 Unpaid Losses	NONE
Supp22	Workers Comp. Carve-Out Supp. Sch F - Pt 1	NONE
Supp22	Workers Comp. Carve-Out Supp. Sch F - Pt 2	NONE
Supp23	Workers Comp. Carve-Out Supp. Sch P - Pt 1	NONE
Supp24	Workers Comp. Carve-Out Supp. Sch P - Pt 2	NONE
Supp24	Workers Comp. Carve-Out Supp. Sch P - Pt 3	NONE
Supp25	Workers Comp. Carve-Out Supp. Sch P - Pt 4	NONE
Supp25	Workers Comp. Carve-Out Supp. Sch P - Pt 5 Sn1	NONE
Supp25	Workers Comp. Carve-Out Supp. Sch P - Pt 5 Sn2	NONE
Supp25	Workers Comp. Carve-Out Supp. Sch P - Pt 5 Sn3	NONE
Supp26	Workers Comp. Carve-Out Supp. Sch P - Pt 6 Sn1	NONE
Supp26	Workers Comp. Carve-Out Supp. Sch P - Pt 6 Sn2	NONE



SCHEDULE O SUPPLEMENT

For the Year Ended December 31, 2009

(To Be Filed By March 1)

Of the NORTH CAROLINA MUTUAL LIFE INSURANCE COMPANY

Address (City, State, Zip Code): Durham, NC 27701-3616

NAIC Group Code: 0000 NAIC Company Code: 67032 Employer's ID Number: 56-0340860

SUPPLEMENTAL SCHEDULE O - PART 1

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid Policyholders				
	1 2005	2 2006	3 2007	4 2008	5 2009(a)
1. Prior	1,913	13	54		
2. 2005	11,680	1,977			
3. 2006	X X X	14,690	1,912		
4. 2007	X X X	X X X	11,552	732	
5. 2008	X X X	X X X	X X X	249	175
6. 2009	X X X	X X X	X X X	X X X	265

Section B - Other Accident and Health

1. Prior	102	6	1		
2. 2005	291	86	7		
3. 2006	X X X	360	129	1	
4. 2007	X X X	X X X	213	122	2
5. 2008	X X X	X X X	X X X	202	135
6. 2009	X X X	X X X	X X X	X X X	214

Section C - Credit Accident and Health

1. Prior					
2. 2005					
3. 2006	X X X				
4. 2007	X X X	X X X			
5. 2008	X X X	X X X	X X X		
6. 2009	X X X	X X X	X X X	X X X	

(a) See Paragraph 9 of the Annual Audited Financial Reports in the General section of the annual statement instructions.

SCHEDULE O SUPPLEMENT (Continued)

SUPPLEMENTAL SCHEDULE O - PART 2

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 2005	2 2006	3 2007	4 2008	5 2009
1. Prior					
2. 2005	50				
3. 2006	X X X	69			
4. 2007	X X X	X X X	17		
5. 2008	X X X	X X X	X X X	(1)	
6. 2009	X X X	X X X	X X X	X X X	

Section B - Other Accident and Health

1. Prior					
2. 2005					
3. 2006	X X X				
4. 2007	X X X	X X X			
5. 2008	X X X	X X X	X X X		
6. 2009	X X X	X X X	X X X	X X X	

Section C - Credit Accident and Health

1. Prior					
2. 2005					
3. 2006	X X X				
4. 2007	X X X	X X X			
5. 2008	X X X	X X X	X X X		
6. 2009	X X X	X X X	X X X	X X X	

SCHEDULE O SUPPLEMENT (Continued)

SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2005	2 2006	3 2007	4 2008	5 2009
1. 2005	14,789	13,701	13,657	X X X	X X X
2. 2006	X X X	16,454	16,660	16,602	X X X
3. 2007	X X X	X X X	12,270	12,326	12,284
4. 2008	X X X	X X X	X X X	332	429
5. 2009	X X X	X X X	X X X	X X X	424

Section B - Other Accident and Health

1. 2005	433	526	385	X X X	X X X
2. 2006	X X X	403	549	490	X X X
3. 2007	X X X	X X X	359	335	337
4. 2008	X X X	X X X	X X X	308	443
5. 2009	X X X	X X X	X X X	X X X	358

Section C - Credit Accident and Health

1. 2005				X X X	X X X
2. 2006	X X X				X X X
3. 2007	X X X	X X X			
4. 2008	X X X	X X X	X X X		
5. 2009	X X X	X X X	X X X	X X X	

SCHEDULE O SUPPLEMENT (Continued)

SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2005	2 2006	3 2007	4 2008	5 2009
1. 2005	14,839				
2. 2006	X X X	16,523			
3. 2007	X X X	X X X	12,287		
4. 2008	X X X	X X X	X X X	331	
5. 2009	X X X	X X X	X X X	X X X	424

Section B - Other Accident and Health

1. 2005	433				
2. 2006	X X X	403			
3. 2007	X X X	X X X	359		
4. 2008	X X X	X X X	X X X	308	
5. 2009	X X X	X X X	X X X	X X X	358

Section C - Credit Accident and Health

1. 2005					
2. 2006	X X X				
3. 2007	X X X	X X X			
4. 2008	X X X	X X X	X X X		
5. 2009	X X X	X X X	X X X	X X X	

SUPPLEMENTAL SCHEDULE O - PART 5

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business		1 Methodology	2 Amount
1. Industrial life		Development	1,123
2. Ordinary life		Development	1,947
3. Individual annuity			
4. Supplementary contracts			
5. Credit life			
6. Group life		Development	1,192
7. Group annuities			
8. Group accident and health		Standard Factor	159
9. Credit accident and health			
10. Other accident and health		Development	143
11. TOTAL			4,564



Medicare Part D Coverage Supplement
(Net of Reinsurance)

NAIC Group Code: 0000

(To be Filed By March 1)

NAIC Company Code: 67032

	Individual Coverage		Group Coverage		5 Total Cash
	1	2	3	4	
	Insured	Uninsured	Insured	Uninsured	
1. Premiums Collected					
1.1 Standard Coverage					
1.11 With Reinsurance Coverage		X X X		X X X	
1.12 Without Reinsurance Coverage		X X X		X X X	
1.13 Risk-Corridor Payment Adjustments		X X X		X X X	
1.2 Supplemental Benefits		X X X		X X X	
2. Premiums Due and Uncollected - change					
2.1 Standard Coverage					
2.11 With Reinsurance Coverage		X X X		X X X	X X X
2.12 Without Reinsurance Coverage		X X X		X X X	X X X
2.2 Supplemental Benefits		X X X		X X X	X X X
3. Unearned Premium and Advance Premium - change					
3.1 Standard Coverage					
3.11 With Reinsurance Coverage		X X X		X X X	X X X
3.12 Without Reinsurance Coverage		X X X		X X X	X X X
3.2 Supplemental Benefits		X X X		X X X	X X X
4. Risk-Corridor Payment Adjustments - change					
4.1 Receivable		X X X		X X X	X X X
4.2 Payable		X X X		X X X	X X X
5. Earned Premiums					
5.1 Standard Coverage					
5.11 With Reinsurance Coverage		X X X		X X X	X X X
5.12 Without Reinsurance Coverage		X X X		X X X	X X X
5.13 Risk-Corridor Payment Adjustments		X X X		X X X	X X X
5.2 Supplemental Benefits		X X X		X X X	X X X
6. Total Premiums		X X X		X X X	
7. Claims Paid					
7.1 Standard Coverage					
7.11 With Reinsurance Coverage		X X X		X X X	
7.12 Without Reinsurance Coverage		X X X		X X X	
7.2 Supplemental Benefits		X X X		X X X	
8. Claim Reserves and Liabilities - change					
8.1 Standard Coverage					
8.11 With Reinsurance Coverage		X X X		X X X	X X X
8.12 Without Reinsurance Coverage		X X X		X X X	X X X
8.2 Supplemental Benefits		X X X		X X X	X X X
9. Healthcare Receivables - change					
9.1 Standard Coverage					
9.11 With Reinsurance Coverage		X X X		X X X	X X X
9.12 Without Reinsurance Coverage		X X X		X X X	X X X
9.2 Supplemental Benefits		X X X		X X X	X X X
10. Claims Incurred					
10.1 Standard Coverage					
10.11 With Reinsurance Coverage		X X X		X X X	X X X
10.12 Without Reinsurance Coverage		X X X		X X X	X X X
10.2 Supplemental Benefits		X X X		X X X	X X X
11. Total Claims		X X X		X X X	
12. Reinsurance Coverage and Low Income Cost Sharing					
12.1 Claims Paid - net to reimbursements applied	X X X		X X X		
12.2 Reimbursements Received but Not Applied - change	X X X		X X X		
12.3 Reimbursements Receivable - change	X X X		X X X		X X X
12.4 Healthcare Receivables - change	X X X		X X X		X X X
13. Aggregate Policy Reserves - change					X X X
14. Expenses Paid		X X X		X X X	
15. Expenses Incurred		X X X		X X X	X X X
16. Underwriting Gain/Loss		X X X		X X X	X X X
17. Cash Flow Results	X X X	X X X	X X X	X X X	

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